

REPORT DOCUMENTATION PAGE

Form Approved
OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503.

1. AGENCY USE ONLY (Leave blank)

2. REPORT DATE
AUG 1999

3. REPORT TYPE AND DATES COVERED
FINAL REPORT (07-98 TO 07-99)

4. TITLE AND SUBTITLE
PREDICTORS OF RECRUITMENT AND RETENTION FACTORS TO AID IN
THE MANAGEMENT OF TURNOVER IN THE ARMY DENTAL CORPS

5. FUNDING NUMBERS

6. AUTHOR(S)
LIEUTENANT COLONEL MARK E. MCCLARY, U.S. ARMY DENTAL CORPS

7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)
GREAT PLAINS REGIONAL MEDICAL COMMAND
BLDG 1001
2421 DICKMAN ROAD
FORT SAM HOUSTON TEXAS 78234-6200

8. PERFORMING ORGANIZATION
REPORT NUMBER

9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES)
US ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
BLDG 2841 MCCS-HRA (US ARMY-BAYLOR PROGRAM IN HCA)
3151 SCOTT RD SUITE 1412
FORT SAM HOUSTON TEXAS 78234-6135

10. SPONSORING / MONITORING
AGENCY REPORT NUMBER

31-99

11. SUPPLEMENTARY NOTES

12a. DISTRIBUTION / AVAILABILITY STATEMENT
APPROVED FOR PUBLIC RELEASE; DISTRIBUTION IS UNLIMITED

20040226 172

13. ABSTRACT (Maximum 200 words)

Recruitment and retention of U.S. Army Dental Corps officers continues to be of great concern. A better understanding of the factors related to officers' intentions and feelings will assist Dental Corps strategic planning efforts. The purpose of this management project is to examine factors that influence Army Dental Corps officers' career decisions and feelings concerning their leadership. The factors of interest are those that affect officers' decisions to remain in or leave the service, those that affected officers' decisions to join the service, and factors they believe affect officers' decisions to join the service today. The goal is to evaluate and analyze the 1997 Dental Officer Recruitment and Retention Survey to ascertain the factors impacting recruitment, retention, and turnover, as well as attitudes toward Dental Corps leadership. Factors found to influence officers' decisions are related to pay, training and education, job satisfaction, quality of life, location, and years of service. Findings indicate that officers currently in dental specialty programs are more likely to stay in the Army. Special pay increases and potential future increases also influence officers to stay, where as low pay influences them to leave. Officers in their initial commitment, and those with less than six or more than 18 years of service are more likely to leave. Age, gender, rank, marital status, and type of unit did not influence officers' intentions. Immediate advanced dental educational opportunities are important for recruiting young dentists into the Army, and early opportunities for dental specialty training are important to retain them. Feelings about Dental Corps leadership generally did not influence officers' intentions, but the more senior officers, and those in administrative and special assignment positions tended to have a more positive feeling about the leadership.

14. SUBJECT TERMS
Recruitment, Retention, and Turnover of U.S. Army Dentists.

15. NUMBER OF PAGES
174

16. PRICE CODE
N/A

17. SECURITY CLASSIFICATION
OF REPORT
UNCLASSIFIED

18. SECURITY CLASSIFICATION
OF THIS PAGE
UNCLASSIFIED

19. SECURITY CLASSIFICATION
OF ABSTRACT
UNCLASSIFIED

20. LIMITATION OF ABSTRACT
UNLIMITED

Running head: RECRUITMENT & RETENTION

**Predictors of Recruitment & Retention Factors to Aid in the
Management of Turnover in the Army Dental Corps**

Graduate Management Project

U.S. Army-Baylor University Graduate Program in Healthcare
Administration

Lieutenant Colonel Mark McClary, Dental Corps, USA

January 1999

DISTRIBUTION STATEMENT A

Approved for Public Release
Distribution Unlimited

Acknowledgements

I want to recognize Colonel Michael Carino and Colonel Frank Nasser of the U.S. Army Dental Corps for their efforts in designing and distributing the survey instrument used for this project. I also want to thank them for the compilation of the data, and for making the surveys and tabulated data available for this project. I want to recognize and thank the following individuals for their efforts and help with the preliminary study involving this topic for Research Methods: Major Rob Goodman, MS, USA, Captain Tony Cook, MS, USA, and Captain Neal Jennings, MSC, USAF. I want to thank Colonel Mary A. Svetlik, MS, USA, PhD. for her help and supervision with the project. I want to thank Lieutenant Colonel Jody Rogers, MS, USA, PhD. for his efforts as the faculty reader for this project. Finally, I want to recognize and thank Dr. A. David Mangelsdorff, PhD. for his help from the beginning with this project and his encouragement to adopt it as a graduate management project.

Abstract

Recruitment and retention of U.S. Army Dental Corps officers continues to be of great concern. A better understanding of the factors related to officers' intentions and feelings will assist Dental Corps strategic planning efforts. The purpose of this management project is to examine factors that influence Army Dental Corps officers' career decisions and feelings concerning their leadership. The factors of interest are those that affect officers' decisions to remain in or leave the service, those that affected officers' decisions to join the service, and factors they believe affect officers' decisions to join the service today. The goal is to evaluate and analyze the 1997 Dental Officer Recruitment and Retention Survey to ascertain the factors impacting recruitment, retention, and turnover, as well as attitudes toward Dental Corps leadership. Factors found to influence officers' decisions are related to pay, training and education, job satisfaction, quality of life, location, and years of service. Findings indicate that officers currently in dental specialty programs are more likely to stay in the Army. Special pay increases and potential future increases also influence officers to stay, where as low pay influences them to leave. Officers in their initial commitment, and those with less than six or more than 18 years of service are more likely to leave. Age, gender, rank, marital status, and type of unit did not influence officers' intentions. Immediate advanced dental educational opportunities are important for recruiting young dentists into the Army, and early opportunities for dental specialty training are important to retain them. Feelings about Dental Corps leadership generally did not influence officers' intentions, but the more senior officers, and those in administrative and special assignment positions tended to have a more positive feeling about the leadership.

Table of Contents

	Page
Introduction	2
Conditions which prompted the Study	2
Statement of the Research Question	4
Literature Review	5
Purpose Statement	18
Methods and Procedures	21
Results	32
Discussion	53
Conclusion and Recommendations	64
List of Appendices	71
References	72

List of Tables

	Page
Table 1. Category Variables for the Sub-area: List Your Three Reasons for Joining the ADCS	26
Table 2. Category Variables for the Sub-area: List Your Three Reasons for Remaining in the ADCS	27
Table 3. Category Variables for the Sub-area: List Your Three Reasons for Leaving the ADCS	28
Table 4. Additional Comments	29
Table 5. Factors Significantly Related to Intent	34
Table 6. Descriptive Statistics of the Significant Variables	35
Table 7. Most Salient Variables Predictive of Intent	33
Table 8. Correlation Table for Recruitment Variables	38
Table 9. Frequencies for Recruitment Variables	42
Table 10. Correlation Table for Leadership Variables	43
Table 11. Frequencies for the Leadership Variables	51
Table 12. Correlation Values for Leadership Variables and Locations	52
Table 13. Influence of Special Pay Increases on Intent to Stay In the Army	54
Table 14. DCYOS and Intent to Stay in the Army	55

List of Figures

	Page
Figure 1. Crosstabulation of Age and Influence of AEGD-1	40
Figure 2. Crosstabulation of Age and Prior Private Practice	40
Figure 3. Crosstabulation of Age and Feeling about Leadership Awareness of Identified Issues	45
Figure 4. Crosstabulation of Age and Feeling About Leadership Concern with Identified Issues	46
Figure 5. Crosstabulation of Age and Feeling About Leadership Taking Action to Address Identified Issues	47
Figure 6. Crosstabulation of Rank and Feeling About Leadership Awareness of Specific Pay Issues	48
Figure 7. Crosstabulation of Rank and Leadership Concern with Specific Pay Issues	49
Figure 8. Crosstabulation of Rank and Feeling About Leadership Taking Action to Address Specific Pay Issues	50
Figure 9. Crosstabulation of Age and Travel Opportunities as a Reason for Joining the ADCS	61

Introduction

Conditions which Prompted the Study

The U.S. Army Dental Corps is experiencing considerable difficulty concerning recruitment and retention of active duty dental officers. The problem became more evident over the past eight to ten years, and in the mid 1990s evolved into a major concern for the leadership of the Corps. The senior leadership of the Army Dental Corps considered pay increases as a way to address the problem, but recognized that a combined, tri-service approach was necessary to obtain congressional consideration and approval. In 1996 the Army, Navy, and Air Force were able to coordinate and combine efforts to gain congressional approval of a bill designed to increase special pays and establish an accession bonus. The National Defense Authorization Act for Fiscal Year 1997 provides for increases in variable special pay, additional special pay, and board certified pay for dental officers. It also provides for an accession bonus of \$30K for newly recruited dental officers (Joseph, 1997).

These pay increases, however, provide the most increase in total pay to dental officers with less than three years of service. Board certified dental officers received a small increase in total pay, and only new accessions received the accession bonus. Many dental officers received no pay increase. Efforts to provide pay increases to all dental officers would continue, but obtaining congressional approval for increases in defense associated budgets is difficult in a time of military downsizing.

Ulschak and SnowAntle (1992) emphasize that turnover is an ongoing process, an inevitable part of nearly every organization, and it needs to be planned for and managed. While the senior leadership of the Army Dental Corps continues to work toward increasing pay for officers, it realizes that turnover is an ongoing process and factors other than pay are involved. Furthermore, recruitment and retention of officers continues to be of great concern of the leadership and the Dental Corps. A better understanding of turnover, retention, and recruitment in the Dental Corps is necessary for effective management within the Dental Corps. To help provide that understanding, senior leaders developed and distributed a survey to over 1200 active duty dental officers. The 1997 Dental Officer Recruitment and Retention Survey is designed to identify factors associated with recruitment and retention, and specific concerns and issues of dental officers. The survey will also provide feedback concerning the pay increases of fiscal year 1997 and feelings about future pay increase proposals. A copy of the survey is enclosed in appendix A and a description is included in the methods section.

This management project will involve a complete analysis of the results of the 1997 Dental Officer Recruitment and Retention survey. It will include identification of the factors that affect intentions, retention, and recruitment of dental officers, and thus insight into turnover of officers in the Dental Corps. The results of the project will help Dental Corps leaders better understand the intentions and feelings of the

active duty dental officers, and provide an adjunct for management of human resources.

Statement of the Research Question

The research question for this management project consists of three parts. All three parts of the question will be considered with respect to the results of the survey. That is, answers to the questions will be determined by the results of the survey. The first part of the research question is stated as follows: What are the most significant factors that influence Army Dental Corps officers' decisions to remain in or leave the service. The second part of the question is stated as follows: What are the factors that influenced Dental Corps officers to join the service, or factors they believe influence officers to join today? The third part of the research question is stated as follows: How is the leadership of the Army Dental Corps perceived by Dental Corps officers?

The first part of the research question focuses on factors related to retention of officers. The second part focuses on factors and beliefs related to recruitment of officers. The third part of the question focuses on perceptions of officers concerning the leadership of the Dental Corps. Together, the answers should provide valuable information related to turnover of officers in the Dental Corps. And together, the answers should clearly help aid Dental Corps senior leaders in human resource management. Additionally, the answers may be of value for the Medical Corps, and other corps and health care professionals.

Literature Review

A review of the literature provides a historical background concerning issues related to turnover, retention and recruitment in health care professions. Studies involving dentists and these issues are sparse, but studies related to other health care fields are well represented in the literature. Published studies provide valuable insight into the problems of turnover and retention, both in the civilian sector and in the military. Those that are related to this project, and help provide a basis for it, are presented and discussed in this section.

Price and Mueller (1981) did a study to learn more about why nurses decide to stay in or leave a hospital. They found the following variables to be important in producing less turnover: intent to stay, job satisfaction, participation in decision making, communication, promotional opportunities, and kinship responsibility. Kinship responsibility refers to the existence of obligations to relatives residing in the community. The important variables that produced more turnover included: repetitive work and increased level of training or education.

They presented a causal model of turnover that helped describe a relationship between turnover and related independent variables or determinants. Intent to stay and job satisfaction are intervening variables, with intent to stay immediately preceding and inversely related to turnover. Job satisfaction is an intervening variable between intent to stay and variables such as communication, participation, promotional opportunities and pay. Some variables like kinship responsibility affect

intent to stay directly, and opportunity or availability for alternative jobs affects turnover directly.

A few years later Price and Mueller (1986) used a slightly revised causal model to study turnover of hospital employees. The model used another intervening variable called commitment. It intervened between satisfaction and intent to leave, with a negative affect on the later, dependent variable. Intent to leave was by far the most important determinant of turnover. They also found income to be a considerably more important determinant than opportunity, and satisfaction more important than commitment. They point out that this was an attempt to develop a comprehensive model to explain turnover, and they were not very successful. Only 10 percent of the explained variance was accounted for by the model. Interestingly, this is about average compared with other research on turnover (Price & Mueller, 1986).

The causal model described by Price and Mueller presents one way of categorizing and organizing independent variables that affect turnover. A turnover model professed by Mobley (1982) treated the independent variables differently, but like Price and Mueller centered on intent as the proximate determinant of turnover. Mobley identified it as intent to leave, with it having a positive affect on turnover. This study by Mobley also confirmed that intent is significantly predictive of future behavior, in this case, turnover. Mangelsdorff (1984), and later Kim, Price, Mueller, & Watson (1996), found career intentions to be predictive of future behavior. Parasuraman

(1989) found the same in a study of nursing turnover. This well documented relationship between intent and turnover or future behavior is generally accepted.

In the recent study by Kim, et al. (1996), a modified model of causal turnover is used to identify significant determinants of career intent of military physicians. This new causal model of intent to stay focuses on intent to stay in the service as the dependent variable. With previous literature supporting this study, "career intent" will also be used in this paper as the dependent variable. It will have the same meaning as intent to stay, or intent to stay in the Army Dental Corps as a career, until retirement.

The model used by Kim, et al. (1996) in their study of military physicians was found to work adequately among salaried physicians. They included variables emphasized by economists, psychologists, and sociologists. The variables they found to be most important in explaining career intent included: organizational commitment, job satisfaction, search behavior, opportunity, met expectations, and promotional chances. Since this study was designed to look at career intentions of military physicians, the categorization of independent variables will be used as a guide for this study of Dental Corps officers. The population of study for this project, active duty Army dentists, is most closely related to that of the Kim study. Kim's causal model of intent to stay will not be used in totality because the survey instrument used here was not designed specifically to obtain the data for this project.

Another study of military physician retention looked at a sample of Navy physicians with eight or fewer years of service (Franco, 1989). Variables found to significantly affect retention included: promotion opportunity, job security, friendships, and service to country. Although pay for these military physicians was reported to be about half that of their civilian counterparts, pay had no impact on retention likelihood. The study of military dentists will consider a similar group, as to years of service, and pay will be a variable of great interest.

A study to evaluate the special pays for Navy dentists found civilian general dentists to average about \$7000/year more than Navy general dentists, and civilian specialists to make between \$50,000 to \$60,000 more than Navy specialists (Taylor, 1991). These figures represent a comparison between Navy dentists and civilian dentists practicing as sole practitioners, partners, or members of group practices. The civilian pay data used in the comparison was income net of business expenses and before personal taxes. The civilian pay was also adjusted to compensate for the costs of fringe benefits received by Navy dentists.

All military dentists of similar pay grades make essentially the same base pay and special pays, except for board certified pay. Special pays for military dentists are of three types. Variable Special Pay (VSP) is paid on a monthly basis to all dental officers at a rate dependent on the number of years of creditable service completed. Dental Additional Special Pay

(DASP) is paid annually to dental officers who are not participating in their initial residency training. These rates also vary according to the years of creditable service completed. Entitlement to DASP is contingent upon execution of a legally binding written agreement to remain on active duty for one year beginning on the effect date of the agreement.

Board Certified Pay (BCP) is paid monthly to those dental officers who have completed a residency training program and achieved board certification in their specialty field. Again, these rates also vary according to the number of years of creditable service completed. Appendix A shows the various amounts of special pays that dental officers are eligible to receive according to years of creditable service completed. It includes comparisons of the pay rates before October 1996 and those that became effective 1 October 1996. Appendix A also shows the most recent pay rates that became effective 18 November 1997.

Brennand (1991) did a study of Army physician retention at one military facility. He found the top five factors associated with physicians leaving active duty were: lack of geographic control, potential service in a conflict area, poor military compensation, poor administrative support staff, and lack of preferred type of training opportunity. The variable, military compensation, included base pay, special pay, bonuses, and other military benefits. Of the five factors, identified in a U.S. Government Accounting Office (GAO) report (Baine, 1990), that most influenced physicians' plans about military service, levels

of military pay was the only one also found in Brennand's top five. The other four factors identified by the GAO study included: time spent on non-physician tasks, ability to maintain proficiency in a medical specialty, time spent on readiness training, and undesired permanent changes of station.

Mangelsdorff's study (1984) of Army psychologists found, as noted earlier, that intentions to remain on active duty were significantly related to the behavior of actually remaining on active duty. He also found the probability of Army psychologists remaining on active duty was related to increasing years of service, a sense of membership in the Army, opportunities for personal accomplishments, self-improvement or promotions, and availability of retirement benefits. In a later study Mangelsdorff (1989) confirmed that intentions were predictive of behavior, as well as the other findings. He also found the decision to remain on active duty was affected by commitment to the military and the opportunity for professional advancement such as specialty training.

In a study of nursing turnover in the same year, Parasuraman (1989) showed that the strength of the intention-turnover relationship decreased as the time interval between cited intentions and turnover behavior increased. This study also found that personal, organizational, and job experience variables influence turnover through their effects on three attitudinal variables, felt stress, job satisfaction, organizational commitment, and intent to leave.

Reineck (1990) studied the factors that contributed to anticipated turnover among nurses in Army hospitals. She found that age and factors related to job satisfaction affected anticipated turnover. She found the contextual factors of group cohesion, satisfaction with pay, and instrumental communication, to be most effective in explaining job satisfaction. Interestingly, she did not find employment alternatives in the community to be a strong predictor of intent to leave. This is unlike the findings of studies by Price and Mueller (1981), and Gurney, Mueller, and Price (1997). Also, Reineck did not find the lack of opportunity for promotion within the organization to be a strong predictor of intent to leave, unlike several other studies (Price & Mueller, 1981, Kim, et al., 1996, and Gurney, Mueller, & Price, 1997).

In a study of nurse managers, those reporting an intention to leave within six months cited their reasons. The strongest factors influencing the decision to leave included: career changes, returning to school, dissatisfaction with role, personal/family commitments, dissatisfaction with the organization, desire to return to direct patient care, better opportunities, and salary/benefits (Barrett, 1990). Only 10 percent reported an intention to leave. When all respondents' factors for potentially leaving were considered, the following had the strongest influence: personal/family commitments, dissatisfaction with the organization, better opportunity, dissatisfaction with role, dissatisfaction with immediate supervisor, and career change.

In other health care related fields, findings concerning turnover intentions and related factors similarly involve common themes. In the area of mental health, Blankertz and Robinson (1997) report workers' intentions to leave are related to factors of: age, burnout, job satisfaction, and educational level. Predictors of physical therapy faculty job turnover include factors such as: intentions to leave, decreasing number of years of employment, lower salary, and availability of many job alternatives (Radtko, 1993). Turnover among dental hygienists was found to be directly and negatively related to job satisfaction (Mueller, Boyer, Price, & Iverson, 1994). Factors found to decrease turnover included: increased distributive justice, pay, variety, instrumental communication, work group cohesion, and "an OK workload". Turnover increased with increased education and the availability of external job opportunities.

With the significant relationship between satisfaction and career intentions, many have investigated this area. Blount, LeClair, Miser, Schirner, Weightman, & Jones (1995), found in a study of Army family practice physicians that advanced rank was positively associated with satisfaction, and increased time spent in patient care was negatively associated with satisfaction. The latter is an interesting finding for physicians. This project will attempt to evaluate the influence of the amount time spent with administrative duties has on dentists' intentions to stay in the Army.

In a study of U.S. military physicians, Kravitz, Thomas, Sloss, & Hosek (1993) found dissatisfaction was related to salary and practice inefficiencies; and satisfaction related to age, workload, specialty, and availability of resources. It is anticipated that Army dentists are also dissatisfied with pay and practice inefficiencies. Another study of military physicians, specifically Army internists, found job satisfaction and ultimately intentions to stay in the service related to certain factors. Those factors included: prior associations with Reserve Officer Training Corps (ROTC) and Health Professions Scholarship Programs (HPSP), U.S. Military Academy (USMA) graduate, and Uniformed Services University of Health Services (USUHS) graduate (Zaloznik, 1994). It should be noted that these programs obligate an officer to serve a certain amount of time in the military. A ROTC scholarship requires an officer to serve one year on active duty for each year of the scholarship. Similarly, the HPSP requires a year for year payback by the officer. Advanced dental specialty training programs also obligate an officer to service on active duty after completion of the program, on a year for year basis. Dental specialty training programs can be from two to four years in length. Payback for these could, however, run concurrently with other incurred obligations.

Steinweg (1994) had similar findings in his study of graduates of Army family practice residency programs. Significant predictors of retention were related to USMA attendance, USUHS attendance, fellowship training, and prior

service. Dentists' prior associations with ROTC, HPSP, and the USMA are also expected to influence their intentions to stay in the service and make the Army a career. Opportunities for advanced professional training are expected to influence dental officers' intentions to stay in the service and make the Army a career, as well.

A study of professional satisfaction among dentists, who graduated from the University of Minnesota School of Dentistry during a 12 year period, found satisfaction to be related to professional progress and expectations. Factors included: professional education, chances for professional advancement, practice quality, personal satisfaction, community involvement, and income and income potential (Lange, Loupe, & Meskin, 1982).

In a study of civilian hospital employees, Agho, Mueller, and Price (1993) found that satisfaction is influenced by a combination of characteristics of the environment, the job, and personality variables. Such factors as opportunity or availability of alternative jobs, the degree of repetitiveness in the job, and distributive justice affect employee satisfaction. Distributive justice refers to the extent to which rewards and punishments are related to job performance. McPhee and Townsend's study (1992) of U.S. Air Force occupational therapy officers found satisfaction to be related to promotions and pay. In a study of nurses with doctoral degrees, factors influencing job satisfaction were not unlike those associated with other professionals (Gurney, Mueller, & Price, 1997). Factors influencing satisfaction included:

availability of alternative jobs, autonomy, variety, promotion opportunity, and adequate resources. Pay was not a significant factor. When Wakefield, Curry, Price, Mueller, & McCloskey (1988) studied nurses' satisfaction and differing hospital units, they found satisfaction to be significantly greater on labor-intensive units, such as medical, surgical, and pediatric intensive care units and emergency care units.

In a study of demographic variables and intent to stay, Price and Kim (1993) found significant factors included: age, length of service, education, and rank. The variables of race, religion, marital status, ethnicity, and place of birth were not significantly related to intent to stay.

Carino (1995) found that factors which influence dental officers' military career planning are related to satisfaction and commitment. The most important variables having a positive effect included: professional development, travel, mentorship, postdoctoral training, professional satisfaction, and sense of duty. Frequency of moves, pay, tactical deployments, and military training negatively influenced career planning. This survey of dental officers in 1995 was the precursor to the 1997 survey instrument used for this project. Preliminary results from the 1997 survey found the same six variables to positively influence career planning; and frequency of moves, pay, and tactical deployments to negatively influence career planning (Carino & Nasser, 1997).

In the area of recruitment of health care professionals, Shanahan (1993) reported factors affecting both recruitment and

retention included: salary, education, perceptions, and attitudes. A study of military medicine following the Gulf War recommended that recruitment programs continue to emphasize the opportunities and challenges of practicing in the military. They should include mention of opportunities for field training with units and potential peacetime overseas assignments (Mangelsdorff, Twist, Zucker, Ware, George, & McFarling, 1992). It is important for recruiting, retention, and promotion strategies of an organization to be interrelated and part of a long range strategic plan (Solomon, 1997). This study of Dental Corps officers will attempt to identify specific factors that influence the enhancement of recruitment of Army dental officers.

Reducing turnover, increasing retention, and enhancing recruitment are of vital interest to senior Dental corps leaders. In the era of managed care and managed costs, the costs of turnover is an area that needs attention. One of the first costs to the organization is the employee's reduced performance when he or she focuses some attention on looking for another job (Ulschak, & SnowAntle, 1992). These authors go on to cite the costs of replacement, temporary hires, and orientation of new employees. Shanahan (1993) reports the costs involved with vacancies and high turnover include: decreased amount and lack of continuity of patient care, a resulting diminished reputation of the facility or organization, and missed opportunities for program development. The Army dental community has long had an outstanding reputation with customers.

The decreased provision of care, due to turnover losses, could possibly damage that reputation.

It is costly to lose good employees. There are both dollar and time costs involved with termination, hiring and training, vacancy, and productivity loss. When time and dollar costs are combined, the total costs of turnover can be tremendous. By designing a retention plan that puts the organization in control, costs and vulnerability to personnel losses can be alleviated (Jac, 1997). This project can aid in the effort of designing both a retention and recruitment strategy for the Dental Corps. Blankertz and Robinson (1997) emphasize the costs of recruitment, and reinforce the idea of costs of turnover related to disruption in service provision.

While turnover can have numerous impacts on an organization, both positive and negative, it was found to have a net negative effect on instrumental communication and behavioral commitment. Instrumental communication refers to the formal transmission of job information among the employees. Behavioral commitment is a concept that attaches behavioral acts to an individual. An indicator of this would be an individual's perception of the likelihood of remaining employed in an organization. Turnover had no significant effect on job satisfaction and promotional opportunities (Price, 1989 and Mueller & Price, 1989). Related to these findings, detrimental consequences of turnover to an organization included: absenteeism, passive job behavior, and disruption of the work performance of co-workers (DeMicco & Olsen, 1988).

Inappropriate or unmanaged turnover in the Dental Corps could have demoralizing effects on individuals. There is certainly the potential for demoralization to cause some dentists to have a decreased interest in working. There is also the potential for that type of attitude to affect the performance of other dentists and auxiliary personnel.

Purpose Statement

The purpose of this management project is to examine factors that influence Army Dental Corps officers' career decisions and feelings concerning their leadership. The factors of interest are those that affect officers' decisions to remain in or leave the service, those that affected officers' decisions to join the service, and factors they believe affect officers' decisions to join the service today.

The goal is to evaluate and analyze the 1997 Dental Officer Recruitment and Retention Survey to ascertain the factors impacting recruitment, retention, and turnover, as well as attitudes toward Dental Corps leadership.

The hypothesis statement is three-fold corresponding to the parts of the research question. The first part of the hypothesis statement is that career intent of Dental Corps officers is influenced by factors related to job satisfaction and commitment, and demographic factors. Variables expected to influence job satisfaction include: opportunities for education and training, pay, promotional opportunities, quality of professional practice, quality of life, and travel and adventure of military life. Increased opportunities for education and

training, increased pay, increased promotional opportunities, improvements in the quality of professional practice and life, and opportunities for travel and adventure should positively influence satisfaction and the intent to stay in the Army.

Variables expected to influence commitment include: HPSP commitment, ROTC commitment, Advanced Education in General Dentistry-one year (AEGD-1) commitment, and a sense of duty. Increased commitments and a strong sense of duty should positively influence the intent to stay in the Army. Demographic variables expected to be related to career intent include: age, rank, and years of service. Career intent is expected to increase as age, rank, and years of service increase.

The second part of the hypothesis statement is that Dental Corps officers' decision to join the service, or factors they believe influence officers to join today, are also affected in the same way by the factors related to job satisfaction and commitment. The expected variables related to job satisfaction, and their direction of influence are the same as for part one. The expected variables related to commitment are the same, with the exception and exclusion of AEGD-1 commitment. An AEGD-1 commitment is incurred after joining. For this part of the hypothesis, AEGD-1 is included in education and training opportunities available in the Army if they join.

The third part of the hypothesis statement is that the leadership of the Army Dental Corps is perceived by officers as

being aware of, concerned about, and taking as much action as possible involving pay issues. Also hypothesized, though, is that the leadership is perceived as not being aware of other issues of concern related to job satisfaction.

The study by Kim, et al. (1996) of determinants of career intent among physicians provides a guide for the use of variables and their categorization for this project. Many variables for this project are predetermined by the questions designed for the survey. For the purpose of this project, the dependant variable is career intent, or the intent to stay in and make the Army a career. The development of this variable is explained in the methods section. Job satisfaction is the extent to which the dental officers like their jobs. The commitment variable refers to owed loyalty to the Dental Corps incurred as an obligation or a sense of duty to country or the Corps. Pay is total pay, and includes salary, special pays, and bonuses. Education and training are used to mean continuing professional education and advanced dental specialty training, for example, specialty training in orthodontics.

The distinction is made here between AEGD-1 and AEGD-2. AEGD-1 is a one-year, internship-like dental training program for recent dental graduates offered the first year upon entry into the Dental Corps. The AEGD-2 is a two year, advanced dental specialty training program for the specialty of comprehensive dentistry. Two other operational definitions are presented here. HPSP or Health Professions Scholarship Program is a scholarship available upon entering dental school or while

in dental school in exchange for an obligation to serve on active duty. ROTC may also lead to an obligation to serve on active duty if a student is awarded a ROTC scholarship.

Methods and Procedures

This project uses the data obtained from the 1997 Dental Officer Recruitment and Retention Survey. The survey was mailed to all 1206 dental officers on active duty with the U.S. Army. The initial mailing went out in November 1996. A second mailing for non-returned surveys was done in January 1997. By the end of February, there were 765 survey responses. The response rate of 63 percent provided a sample size of 765 active duty dental officers.

Descriptive statistics will indicate frequencies, means, and standard deviations for variables of interest. Frequencies for all survey responses are included in Appendix B. All of the independent variables from the survey will be compared with the dependant variable, career intent, using Analysis of Variance (ANOVA). This project will focus on independent variables with significance of $p < .05$ using the F-test method. Multiple regression will be used to determine the most significant of the independent variables.

Frequencies, correlation analysis, and crosstabulations will be used to analyze relationships of the variables of interest in the areas of recruitment and leadership, with the demographic variables of rank, AOC, age, type of unit, and gender.

A copy of the survey is enclosed in Appendix C. The survey consists of 53 Likert-type scale questions, including sub-

questions, in the categories of career intentions, career influences, recruitment, and leadership. There are an additional 34 questions related to demographics, and four final questions designed to elicit comments involving reasons for joining the Army Dental Care System (ADCS), reasons for remaining in the ADCS, reasons for leaving the ADCS, and additional comments.

Data from the survey was entered into a spreadsheet for statistical analysis using the Statistical Package For The Social Sciences (SPSS). Survey responses for 100 surveys were cross-checked with the data entered into the statistical program to evaluate the accuracy of entry of the data used for this project. There were no discrepancies between the actual responses on the surveys and the data entered in SPSS. The career intentions category included 13 Likert-type scale questions with a range from 1 to 5, with 1 being extremely unlikely and 5 being extremely likely. The questions included five which were designed to determine respondents intentions ranging from "making the Army a career" (staying for 20 years or more) to "intending to leave after completion of my present tour". These five questions were re-coded and combined to form the dependent variable for this project.

The dependent variable is "career intent", meaning intent to stay, or intent to stay in the Dental Corps as a career. The following survey questions were re-coded and combined to form career intent: "I intend to make the Army a career (stay for 20 years or more)", "I intend to leave in 5 or more years", "I

intend to leave in 3 to 4 years", "I intend to leave in less than 3 years", and "I intend to leave after completion of my present tour". Combining these five questions created a career intent variable with a Likert range from 5 to 1, with 5 indicating extremely likely to make the Army a career and 1 indicating extremely unlikely to make the Army a career. The new career intent variable was then validated by using the crosstabs function of SPSS.

The category of career influences consisted of 26 Likert-type scale questions with a range from 5 to 1, with 5 being a strong positive influence and 1 being a strong negative influence. Two spaces in this area were available for write-in responses and their ratings. Any responses made here were not included in the analysis because only a few respondents provided input here, and because when used, responses were typically repeated in the comments area.

The recruitment category contained eight Likert-type scale questions ranging from 5 to 1, with 5 referring to high value and 1 referring to no value. Three of the questions, 20, 22, and 24, were designed to determine the value postgraduate education, the HPSP, and the AEGD-1 had on the respondents' decisions to join the Army. The other five were focused on respondents' feelings about the value those factors, an accession bonus, and special pay increases have on dentists' decisions to join today.

The leadership category included six Likert-type scale questions to determine dental officers' perception about the leadership's awareness, concern, and inclination to take action

concerning pay issues and other issues identified in the survey. The range was from 5 to 1, with 5 meaning they strongly agree and 1 meaning they strongly disagree. The questions in this category and the three preceding categories included a space for a response of "don't know" or "N/A". Responses that indicated this were considered the same as missing variables and excluded from the analysis.

The first ten questions of the demographics category included: gender, marital status, age, AOC, type of unit assigned to, rank, year of graduation, year entered active duty, years of service (YOS), and number of overseas tours. AOC means area of concentration (AOC) and indicates their dental specialty area, except for 63A and 63R. 63A refers to a general dentist without specialty training, and 63R refers to the area of command. 63Rs generally have training in a specialty area, but specialty training is not required for that designation. The remaining questions in this category request yes or no answers, except for 49a which asks for a number of years from 1 to 4 if they were in the HPSP. This refers to the number of years an individual was on the scholarship and equates to the number of years of commitment incurred by the individual. And, 50a asks for a dollar amount of debt the respondent had upon entering active duty.

The comments area provided four sub-areas eliciting write-in responses. The first sub-area allowed respondents to list their three reasons for joining the ADCS. The second area was for their list of three reasons for remaining in the ADCS. The

third area was for their three reasons for leaving the ADCS. This area allowed for existing reasons why they would leave or potential situations, that if existed, would cause them to leave. The forth area was for any additional comments.

Responses for 100 surveys were reviewed to establish common trends and themes. From this initial review, from 10 to 17 categories were developed for each sub-area, into which all verbatim responses were placed. These categories were defined as individual variables in SPSS and the data from the surveys entered. Variables were coded as 1 for yes if listed by the respondent and 0 for no if not listed by the respondent. Zeros were entered for variables if no write-in response was provided. If the same write-in response was listed two or three times in the same sub-area of a survey, it was only entered once as a yes for that variable, for that respondent.

Tables 1 through 4 provide a description of the category variables for each sub-area.

Table 1.

Category Variables for the Sub-area: List Your Three Reasons for Joining the ADCS

-
1. Residency training opportunities/dental specialty training
 2. Travel opportunities
 3. Quality of professional practice/professional association
 4. HPSP/ROTC commitment
 5. Gain clinical experience/professional development
 6. Duty/service to Country/Army/ADCS
 7. Retirement benefits/security
 8. Family association/acceptance with military or prior service
 9. Military life/military training/assignments
 10. Financial reasons: save money, repay debt, in need of a job
 11. High start-up cost of private practice, high stress of private practice, undecided about practice location
 12. Military draft considerations
 13. Opportunities for a variety of jobs
-

Table 2.

Category Variables for the Sub-area: List Your Three Reasons for Remaining in the ADCS

-
1. Dental specialty training/residency training/educational opportunities
 2. Quality of professional life/job satisfaction/professional mentoring/group practice setting/quality people
 3. Travel/adventure of military life
 4. Retirement benefits/security
 5. Duty/service to Country/Army/ADCS
 6. Good assignments
 7. Variety of job opportunities (teaching, administrative, leadership, command)
 8. Gain clinical practice experience
 9. Poor civilian economy
 10. No cost for residency/dental specialty
 11. Military training and advancement/promotion opportunity
 12. Family issues (children in school, spouse working, spouse on active duty)
 13. Undecided about life after the military
 14. Commitment to soldiers/Army field units
 15. Obligation to fulfill (HPSP, ROTC, AEGD-1, dental specialty/residency training program)
 16. Financial reasons: save money, adequate pay, adequate job
-

Table 3.

Category Variables for the Sub-area: List Your Three Reasons for Leaving the ADCS

-
1. Age/retirement/start next career
 2. Poor compensation/low pay/pay inequities
 3. Too many moves/frequency of permanent change of station (PCS) moves
 4. Poorly treated concerning assignments/jobs, limited assignment choices
 5. Family/economic stability of civilian life(kids in school, spouse's employment)
 6. Decreasing resources(dollars, supplies, people)
 7. Non-select for residency/specialty training
 8. Deteriorating Dental Corps/lack of defined purpose and vision(decreasing esprit de corps/morale and lip service like "the Corps has never been better")
 9. Downsizing Army(decreasing locations, benefits, concern for retirees) and unappreciative Army leadership
 10. No longer making a contribution or having fun
 11. Unaware/unresponsive senior leadership
 12. Available civilian jobs/opportunities
 13. Non-select for promotion/poor promotion rates/unfair promotion criteria
 14. Poor Quality of Practice(materials, auxiliaries, lab support, procedures, limited scope of practice)
 15. Potential deployments
 16. Quality of life issues
 17. Lack of job satisfaction(career stagnation, emphasis on military-type training and assignments, lack of professional development, administrative requirements, un-rewarded efforts, not in control of practice, not practicing in specialty area)
-

Table 4.

Additional Comments

-
1. Inadequate pay package/compensation/incentives
 2. Uncertain future for Dental Corps
 3. Poor clinic/mid-level leadership
 4. Poorly treated concerning assignments/jobs
 5. Poor Quality of practice(materials, auxiliaries, lab support, procedures, limited scope of practice)
 6. Lack of job satisfaction(career stagnation, emphasis on military-type training and assignments, lack of professional development, administrative requirements, un-rewarded efforts, not in control of practice, not practicing in specialty area)
 7. Poor senior-level leadership(short sightedness, allowing selection of younger officer for specialty training, production focus of the 1980s, lack of devotion to younger officers and the Corps, unaware of actual working conditions)
 8. Poor promotion rates/criteria
 9. ADCS is a positive experience
 10. Haven't received specialty training/want a specialty training opportunity
-

The distinction is made here between military training and residency training. Military training includes activities such as combat skills and airborne training, and residency training refers to dental specialty training or postgraduate specialty education.

The validity of the category variables developed from the write-in responses was verified using crosstabulations and related Likert-type questions from the body of the survey. For example, crosstabulations indicated a high percentage, 88%, of those including "the opportunity for residency training" as a reason for joining the ADCS, also indicated "the opportunity for postgraduate education" had a positive or strong positive influence on their career planning. Similarly, 90% of those including "opportunities to travel" as a reason to join the ADCS also indicated "travel" had a positive or strong positive influence on their career planning.

Crosstabulations was used in the same manner to validate the category variables for the areas of "reasons for remaining", "reasons for leaving", and "additional comments" with related variables from the body of the survey. This process indicated the validity of variables developed from the write-in responses.

A final variable of interest is the respondent's location at the time of the survey. Each survey is identified with a tracking number. The number identifies the duty assignment location to which surveys were sent. The location variable is sub-divided into 30 variables for entry into SPSS. Twenty-four are major dental activities in the United States, four are

overseas locations (Europe, Panama, Japan, and Korea), and the remaining two are labeled non-clinical and clinic commands. The last two do not identify geographic location. Non-clinical includes those dental officers working in positions outside of clinical facilities, such as administrative and special assignment positions. Non-clinical does not refer to clinical dentists assigned to non-dental organizations. Clinic command includes 13 relatively small, clinical facility locations in the United States. Clinic commands were grouped together in an attempt to limit the number of total location variables and because the number of individuals assigned to each clinic command is small compared to dental activities.

A preliminary study of the results of the survey used for this project considered a limited number of independent variables related to retention of dental officers (Cook, Goodman, Jennings, & McClary, 1997). The variables found to influence career intent for dental officers were related to satisfaction, commitment, rank, age, AFS, and AOC. The most significant variables related to dental officers' career intent included: fulfilling an initial commitment, presently in specialty training, future special pay increases, increase in special pay (\$8K to \$12K/yr), and years of active federal service (AFS).

Future special pay increases and an increase in special pay (\$8K to \$12K/yr) both significantly, positively influence dental officers' intent to stay in the Army. And, those presently in specialty training were significantly more likely to stay in and

make the Army a career. Fulfilling an initial commitment and increasing years of AFS inversely influence intent to stay in the Army. Those fulfilling an initial commitment were more likely not to stay in the Army, and those with more years of AFS are significantly more likely to not stay in the Army (Cook, et al. 1997).

This management project will completely consider all available variables related to dental officers' career intentions, feelings about recruitment, and perceptions of the leadership of the Dental Corps. The project will determine the most salient factors that affect officers' decisions to remain in or leave the service. The project will identify factors that affect officers' decisions to join the service, and factors they feel affect officers' decisions to join today. The project will determine officers' perceptions of the leadership of the Dental Corps. This information will help senior leaders develop a strategic plan involving recruitment and retention of dental officers and aid in the overall management of the Dental Corps.

Results

Frequencies for gender, age, and education were determined for the survey sample. The sample included 674 males and 75 females, with 16 gender variables missing. The following age groups for the sample show the age distribution: 68 age 25-30 years, 95 age 31-35, 126 age 36-40, 244 age 41-45, 156 age 46-50, and 63 over age 50. There were 13 missing age variables. Five-hundred-fourteen had received specialty training, 227 had not, with 24 missing for this variable.

Concerning the area of retention, the factors found to be significantly related ($p < .05$) to "intent to stay in the Army" are presented in Table 5. These factors fall into the categories of pay, training and education, job satisfaction, quality of life, location, leadership, and chronological factors. The descriptive statistics for these variables are presented in Table 6.

The regression equation developed to predict Dental Corps officers' intentions to stay in the Army (using variables significant at $p \leq .01$ and $n \Rightarrow 80\%$ included) was significant, $F(29, 574) = 8.073$, $p < .0001$ (multiple $R = .538$, $R^2 = .290$). The most salient variables (with simple r^s , betas, and significance) are presented below in Table 7.

Table 7.

Most Salient Variables Predictive of Intent

	r	Beta	Significance
Presently in initial commitment	.136	.181	.0001
Dental Corps years of service	-.115	-.180	.0001
Presently in specialty training	-.217	-.147	.0001
Influence of future special pay increases	.258	.134	.002
"Moonlighting" while on active duty	.171	.095	.010
Assigned at West Point	-.115	-.092	.010
Special pay increase (4-8K/YR)	.337	.187	.011
Assigned in Europe	.099	.088	.016
Low pay a reason for leaving the ADCS	-.100	-.088	.024
Special pay increase (8-12K/YR)	.341	.142	.026

$F(29, 574) = 8.073$, $p < .0001$ (multiple $R = .538$, $R^2 = .290$)

Table 5.

Factors Significantly Related to Intent ($p < .05$)

	F	Sig	Pearson's r	R ²
Special pay increase (8-12K/YR)	84.067	.0001	.341	.116
Special pay increase (4-8K/YR)	81.311	.0001	.337	.114
In initial commitment and plan to stay in	63.929	.0001	-.612	.374
Influence of future special pay increases	43.879	.0001	.258	.065
Special pay increase (>12K/YR)	37.379	.0001	.233	.054
Special pay increase (1-4K/YR)	36.458	.0001	.233	.054
Presently in specialty training	32.872	.0001	-.217	.047
"Moonlighting" while on active duty	20.332	.0001	.171	.029
Special pay paid in "lump sum"	17.135	.0001	.162	.026
Influence of quality of life	16.381	.0001	.155	.024
Influence of family acceptance	15.396	.0001	.154	.024
Awarded a HPSP	14.551	.0001	.145	.021
Presently in initial commitment	12.740	.0001	.136	.019
Influence of duty assignments	11.132	.001	.128	.016
Army life a reason for joining the ADCS	11.984	.001	.132	.017
Special pay paid as combination payments	11.283	.001	.131	.017
Influence of frequency of moves (PCS)	10.033	.002	-.121	.015
Influence of military-type training	9.926	.002	.127	.016
Influence of professional satisfaction	9.283	.002	.117	.014
Dental Corps years of service	9.124	.003	-.115	.012
Assigned at West Point	9.062	.003	-.115	.013
Influence of possibility of deployment	9.037	.003	.116	.013
Assigned at Ft. Gordon	8.253	.004	.110	.012
Influence of recent special pay increase	7.912	.005	.109	.012
Influence of Esprit de Corps	7.830	.005	.107	.011
Special pay paid monthly	7.795	.005	.110	.012
Influence of professional development	7.222	.007	.103	.011
Influence of pay	7.012	.008	.102	.010
Low pay a reason for leaving the ADCS	6.846	.009	-.100	.010
Assigned in Europe	6.644	.010	.099	.010
Participated in financial assistance program	6.568	.011	-.098	.010
Age/retirement a reason for leaving ADCS	6.313	.012	-.096	.009
Military life a reason for remaining	6.160	.013	.095	.009
Opportunity for specialty training	6.131	.014	.097	.009
Participation in MOOTW	6.069	.014	-.095	.009
ROTC/HPSP commitment reason to join	5.983	.015	-.094	.009
Value of HPSP on decision to join ADCS	5.843	.016	-.121	.015
Assigned to a non-clinical ADCS position	5.819	.016	.092	.009
Assigned at Ft. Irwin	5.675	.017	-.091	.008
Years Active Federal Service (AFS)	5.662	.018	-.092	.008
Non-select for promotion a reason to leave	5.338	.021	.088	.008
In private practice before active duty	4.980	.026	-.086	.007
Service to country a reason to remain	4.893	.027	.085	.007
Senior leadership is taking action	4.556	.033	.083	.007
Specialty training a reason to join ADCS	4.525	.034	.081	.007
No longer fun/contributing reason to leave	4.408	.036	-.080	.006
Committed to TOE a reason to remain	4.150	.042	.078	.006
Too many moves (PCS) reason to leave	3.968	.047	-.076	.006

Table 6.

Descriptive Statistics of the Significant Variables

	Mean	Std. Deviation	N
Intent	3.5800	1.1500	679
Special pay increase (8-12K/YR)	4.0597	.8813	720
Special pay increase (4-8K/YR)	3.5028	.8462	714
Initial commitment and plan to stay in	1.6048	.4909	124
Influence of future special pay increases	3.7157	.8891	693
Special pay increase (>12K/YR)	4.6308	.6513	734
Special pay increase (1-4K/YR)	3.0618	.8262	712
Presently in specialty training	1.8966	.3047	754
"Moonlighting" while on active duty	1.9000	.3002	760
Special pay paid in "lump sum"	3.8883	.8287	716
Influence of quality of life	3.7331	1.1354	753
Influence of family acceptance	3.6107	1.1947	709
Awarded a HPSP	1.7441	.4367	762
Presently in initial commitment	1.8696	.3370	759
Influence of duty assignments	3.5399	1.0988	752
Army life a reason for joining the ADCS	.1200	.3300	765
Special pay paid as combination payments	3.9793	.8233	725
Influence of frequency of moves (PCS)	2.2846	1.0328	759
Influence of military-type training	2.9430	.9205	684
Influence of professional satisfaction	4.0552	1.0116	761
Dental Corps years of service	2.7100	1.0600	765
Assigned at West Point	.0118	.1100	765
Influence of possibility of deployment	2.4295	1.0008	752
Assigned at Ft. Gordon	.0575	.2300	765
Influence of recent special pay increase	2.9152	.9710	743
Influence of Esprit de Corps	3.6623	.9410	743
Special pay paid monthly	3.7715	.7637	709
Influence of professional development	4.1667	.7637	709
Influence of pay	2.8492	1.3976	756
Low pay a reason for leaving the ADCS	.5000	.5000	765
Assigned in Europe	.1300	.3400	765
Participated in financial assistance program	1.9763	.1521	761
Age/retirement a reason for leaving ADCS	.2000	.4000	765
Military life a reason for remaining	.4100	.4900	765
Opportunity for specialty training	4.2195	.9055	729
Participation in MOOTW	1.8250	.3802	760
ROTC/HPSP commitment reason to join	.2400	.4300	765
Value of HPSP on decision to join ADCS	3.0265	1.7465	452
Assigned to a non-clinical ADCS position	.0706	.2600	765
Assigned at Ft. Irwin	.0105	.1000	765
Years Active Federal Service (AFS)	13.623	6.7687	748
Non-select for promotion a reason to leave	.0654	.2500	765
In private practice before active duty	1.7937	.4049	761
Service to country a reason to remain	.0693	.2500	765
Senior leadership is taking action	3.3622	1.1937	740
Specialty training a reason to join ADCS	.4900	.5000	765
No longer fun/contributing reason to leave	.0183	.1300	765
Committed to TOE a reason to remain	.0052	.0722	765
Too many moves (PCS) reason to leave	.1800	.3800	765

The variable "In an initial commitment and plan to stay in the Army" has the greatest correlation with the dependent variable, but the number of responses included is very low ($n = 124$, or 16%). Similarly, the variable "Value of HPSP on decision to join the ADCS" has a low number of included responses ($n = 452$, or only 59%). These two variables are not used in the regression analysis.

As the correlation values in the tables indicate, the relationships between variables in this study are generally weak. However, the relationships are very significant in many cases, and the sample size of 765 for this study is very large compared to the total population of active duty Army dental officers, 1206. The sample is over 63% of the population and very representative of the population, so even small correlation values that are significant are important for this study (Cooper & Emory, 1995).

The direction of the correlation value (Pearson's r) in Table 5, indicates whether the variable influences officers' intent to stay in the Army (positive value), or whether the variable influences officers' intent to Leave the Army (negative value), except for certain variables. Because of the coding of some survey questions, 1 for "Yes" and 2 for "No", the variable "Presently in specialty training" influences officers to more likely intend to stay in the Army. The variables, "Presently in an initial commitment", "Opportunity to moonlight", and "Awarded a HPSP", are related to officers intentions to leave the Army.

"Dental Corps years of service" and "Years of Active Federal Service" have negative r -values meaning, as years in service increase, officers are more likely to intend to leave the Army. These relationships require more in-depth evaluation and explanation to provide clarity, and this will be provided in the discussion section. Basically, officers with less than six DCYOS or more than 18 DCYOS are more likely to intend to leave the Army. Furthermore, there is a high correlation between DCYOS and years of AFS ($r = .957$), between AFS and rank ($r = .899$), between AFS and age ($r = .876$), DCYOS and rank ($r = .863$), and rank and age ($r = .828$). The relationship between DCYOS and rank will help explanations in the discussion. Generally, captains have $0 < 6$ DCYOS, majors $6 < 12$, lieutenant colonels $12 < 18$, and colonels have 18 or more DCYOS.

Variables not significantly related (at $p < .05$) to "intent to stay in the Army" included age, gender, rank, marital status, AOC, type of unit, travel opportunities, and comments in the Additional Comments section of the write-in responses. While some of the significant variables are from the categories of leadership, location, reasons for joining, reasons for remaining, and reasons for leaving, most variables in these categories are not significantly related to the dependent variable. Seven of eight leadership variables, 25 of the 30 location variables, 10 of 13 reasons for joining, 13 of 16 reasons for remaining, and 12 of 17 reasons for leaving are not significantly related to "Intent to stay in the Army". In total, of the 161 independent variables included in this study,

113 were not significantly related (at $p < .05$) to the dependent variable.

Concerning the area of recruitment, the correlation table in Table 8 shows the 24 variables associated with recruitment and their correlation with rank, AOC, age, type of unit, and gender.

Table 8.

Correlation Table for Recruitment Variables

	Rank	AOC	Age	Unit	Gender
Army life a reason for joining the ADCS	ns	ns	ns	ns	ns
Military association a reason for joining	ns	ns	ns	ns	-.112**
Draft considerations a reason for joining	.149***	ns	.148**	ns	ns
To gain experience in dentistry a reason to join	ns	ns	ns	ns	ns
A job opportunity a reason for joining	ns	ns	ns	ns	ns
High practice costs a reason for joining	.102**	ns	ns	.073*	ns
High quality of practice a reason for joining	.151***	ns	.173***	ns	ns
Retirement benefits/security a reason to join	ns	-.072*	ns	ns	ns
ROTC/HPSP commitment a reason to join	-.086*	ns	-.144***	ns	ns
Save money a reason for joining	ns	ns	ns	-.080*	ns
Service to the country a reason for joining	ns	ns	ns	ns	ns
Specialty training opportunity a reason to join	ns	ns	ns	.074*	ns
Travel opportunities a reason for joining	ns	ns	ns	ns	ns
Postgraduate education & their decision to join(R20)	ns	ns	ns	ns	ns
Postgraduate education & Army's effort to recruit(R21)	.103**	ns	.118***	ns	ns
HPSP & your decision to join(R22)	ns	ns	-.107*	ns	ns
HPSP & Army's effort to recruit(R23)	.144***	ns	.096*	ns	.079*
AEGD-1 yr & your decision to join(R24)	-.118**	ns	-.190***	ns	ns
AEGD-1 yr & Army's effort to recruit(R25)	.086*	ns	ns	ns	.084*
Accession bonus & Army's effort to recruit(R26)	ns	-.083*	ns	ns	ns
Special pay increases & Army's effort to recruit(R27)	ns	-.100**	ns	ns	ns
Awarded a HPSP(D49)	.073*	ns	.125***	-.084*	ns
Influence of AEGD-1 yr on decision to join(D52)	.180***	ns	.236***	-.092*	ns
In private practice prior to joining ADCS(D59)	-.085*	ns	-.226***	ns	ns

*** Significant at .001 level, ** Significant at .01 level, * Significant at .05 level, ns Not significant

The significant relationships between the recruitment variables and the five selected variables are all generally weak. Only two correlation values are greater than .20 and both are related to age. The "Influence of a chance to participate in an AEGD-1 year program on one's decision to join" was coded 1 for "yes" and 2 for "no", so the positive value of .236 indicates that an AEGD-1 year program had more influence on younger officers. This recruiting variable is also significantly related (at $p \leq .001$) to rank. The variable has more influence on more junior officers. The variable "In private practice prior to joining ADCS" was coded the same, so the value of -.226 indicates that a private practice background is more related to older officers than younger officers. Figures 1 and 2 show the actual crosstabulation relationships for age and these two variables.

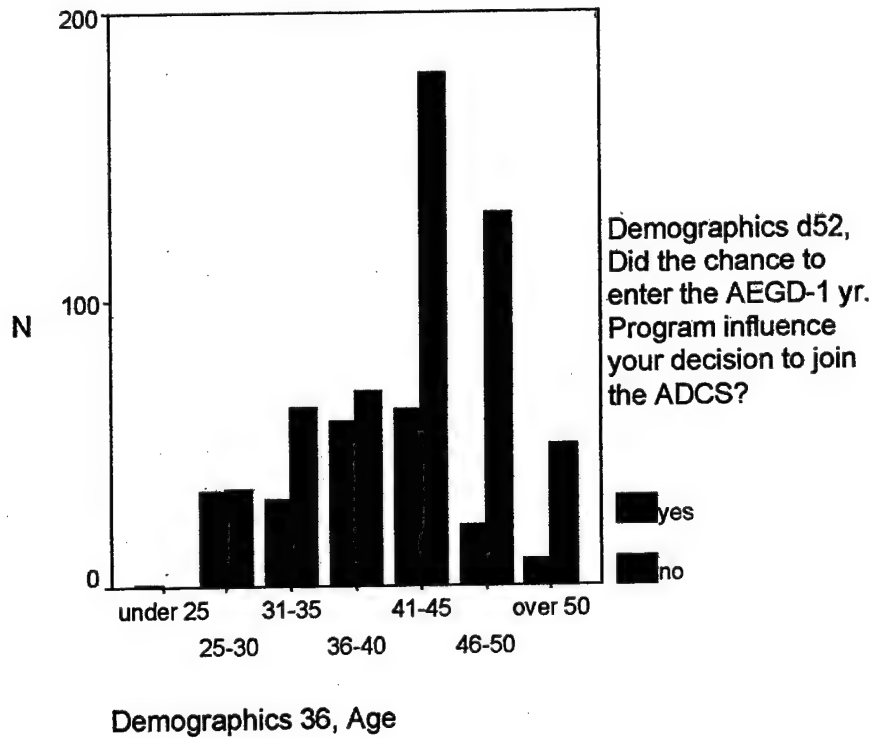


Figure 1. Crosstabulation of Age and Influence of the AEGD-1

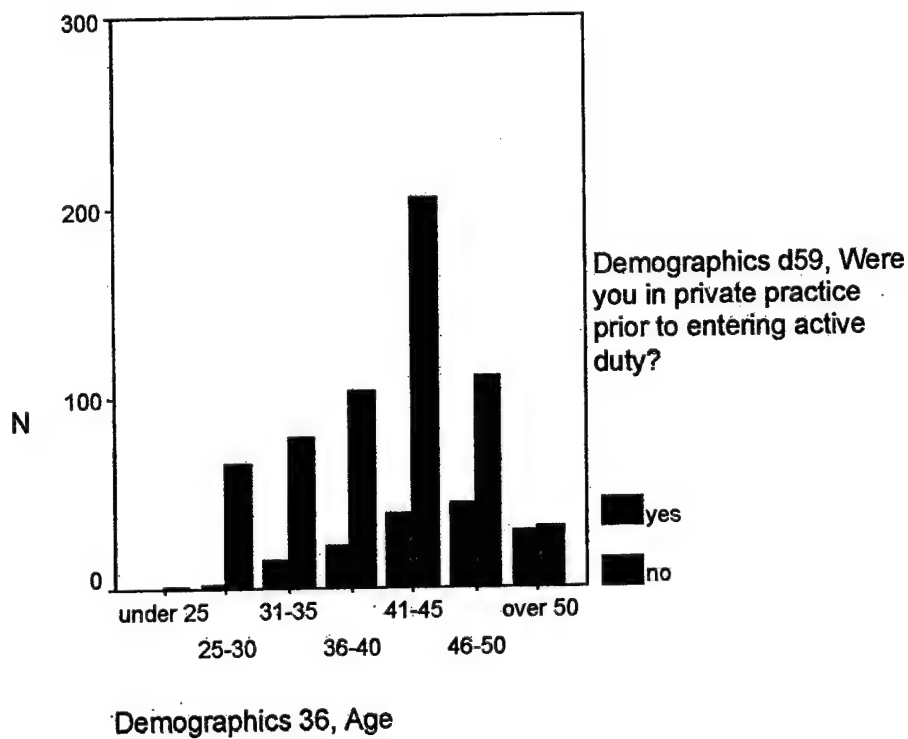


Figure 2. Crosstabulation of Age and Prior Private Practice

Seven other recruiting variables are significantly related (at $p \leq .001$) to either age or rank, although the relationship is very weak. Coding for the following three variables was 0 for "No" and 1 for "Yes". "Draft considerations a reason for joining" is obviously related to more senior ranking officers. "Quality of practice a reason for joining" is related to both age and rank, and to the older, more senior officers. "ROTC/HPSP commitment a reason to join" is inversely related to age, indicating that this variable is more related to younger officers. The following three variables are coded from 5 to 1, high value to no value. "The value that the opportunity for postgraduate education has on the Army's effort to recruit new dental officers" is related weakly to increasing age. "The value that the HPSP has on the Army's effort to recruit" is weakly related to increasing rank. "The value that the opportunity of an AEGD-1 program had on your decision to join the Army" is weakly, inversely related to age. "Awarded a HPSP" was coded 1 for "Yes", 2 for "No", and is weakly, inversely related to increasing age.

Crosstabulations for all recruiting variables significantly related (at $p \leq .05$) to rank, AOC, age, type of unit, or gender are included in Appendix D. Also included in this appendix are crosstabulations for the three most cited reasons for joining, with the five selected variables.

Total frequencies for all the recruiting variables are presented in Table 9. The percentages indicate affirmative responses for "Yes-No" type variables and the combination of "High value"/"Some value" responses for R20-R27.

Table 9.

Frequencies for Recruitment Variables

	% Yes	% indicating "High/Some Value"
Army life a reason for joining the ADCS	8.2	
Military association a reason for joining	12.2	
Draft considerations a reason for joining	1.7	
To gain clinical experience in dentistry a reason to join	31.0	
A job opportunity a reason for joining	2.4	
High practice costs a reason for joining	9.3	
High quality of practice a reason for joining	14.5	
Retirement benefits/security a reason to join	9.7	
ROTC/HPSP commitment a reason to join	23.7	
Save money a reason for joining	18.2	
Service to the country a reason for joining	12.9	
Specialty training opportunity a reason to join	49.2	
Travel opportunities a reason for joining	44.3	
Postgraduate education & their decision to join(R20)		68.7
Postgraduate education & Army's effort to recruit(R21)		79.1
HPSP & your decision to join(R22)		42.3
HPSP & Army's effort to recruit(R23)		85.7
AEGD-1 yr & your decision to join(R24)		48.7
AEGD-1 yr & Army's effort to recruit(R25)		78.2
Accession bonus & Army's effort to recruit(R26)		91.0
Special pay increases & Army's effort to recruit(R27)		77.4
Awarded a HPSP(D49)	25.5	
Influence of AEGD-1 yr on decision to join(D52)	28.1	
In private practice prior to joining ADCS(D59)	20.5	

Concerning the area of leadership, the correlation table in Table 10 shows the 10 variables associated with leadership and their correlation with rank, AOC, age, type of unit, and gender.

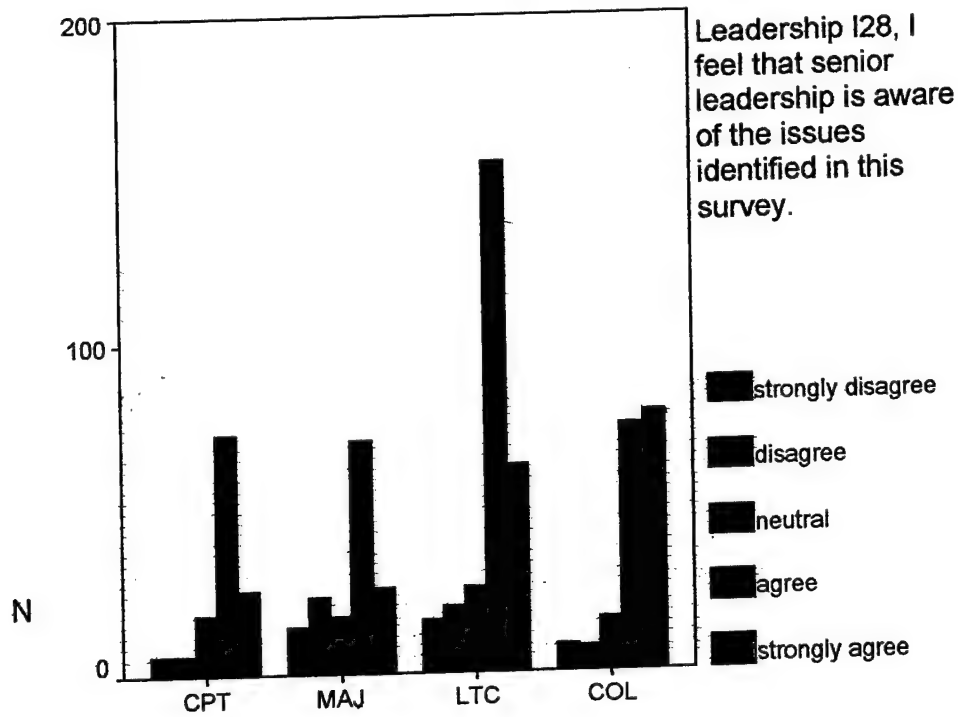
Table 10.

Correlation Table for Leadership Variables

	Rank	AOC	Age	Unit	Gender
Feel leadership is aware of issues in the survey(L28)	.134***	ns	.127***	ns	ns
Feel leadership is concerned about the issues(L29)	.192***	ns	.167***	ns	ns
Feel leadership is taking action to address issues(L30)	.129***	.085*	.119***	ns	ns
Feel leadership is aware of pay issues in the survey(L31)	.135***	ns	.103**	-.098**	ns
Feel leadership is concerned about pay issues(L32)	.166***	-.077*	.142***	ns	ns
Feel leadership is taking action to address pay issues(L33)	.136***	ns	.110**	ns	ns
Influence of mentorship on career planning(CF14g)	.099**	.092*	ns	ns	ns
Unaware leadership a reason to leave the ADCS	ns	ns	ns	ns	ns
Poor clinic level leadership	ns	ns	ns	ns	ns
Poor senior level leadership	ns	ns	ns	ns	ns

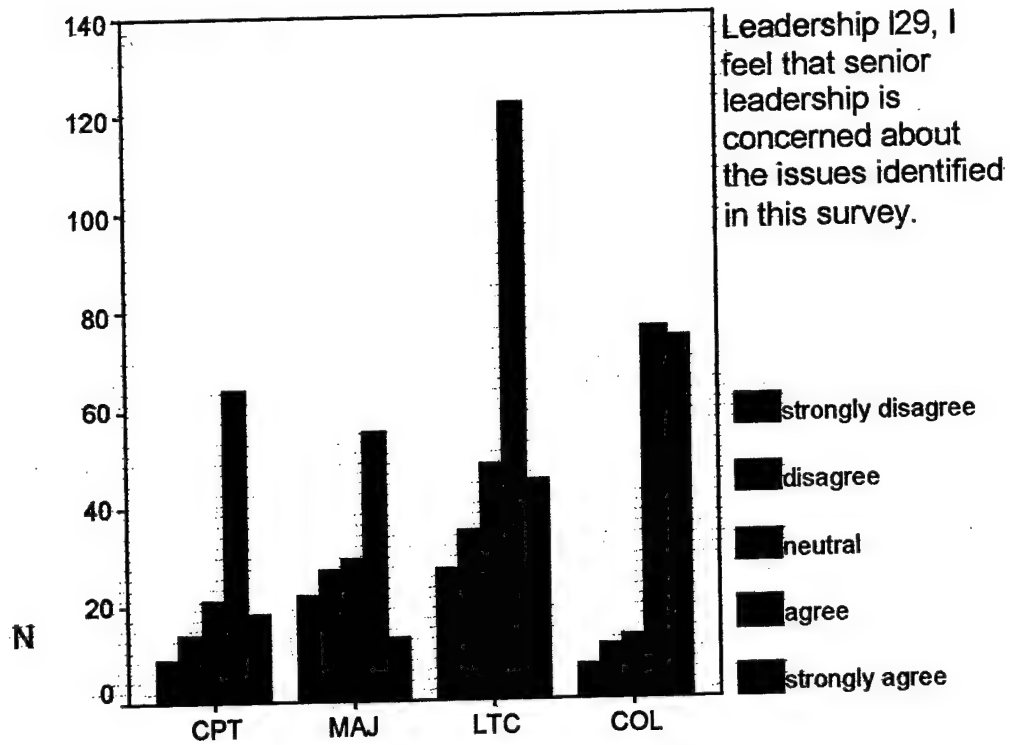
*** Significant at .001 level, ** Significant at .01 level, * Significant at .05 level, ns Not Significant

The significant relationships between the leadership variables and rank and age are very weak. The variables L28-L33 are coded from 5 to 1, with 5 being strongly agree and 1 being strongly disagree. Feelings about the leadership are weakly, directly related to rank and age. The senior, older officers feel more positively about the leadership. Figures 3 thru 8 show the crosstabulations for rank and the most significant (at $p \leq .001$) leadership variables. More senior ranking officers tend to strongly agree more that the leadership is aware, concerned, and taking action to address the issues identified in the survey, including the specific pay issues. The mid-grade officers tend to strongly disagree more that the leadership is concerned, and taking action, particularly with pay issues. Majors consistently had the lowest mean score for all variables L28-L33, where lower values indicated more disagreement, and less of a positive feeling about the leadership.



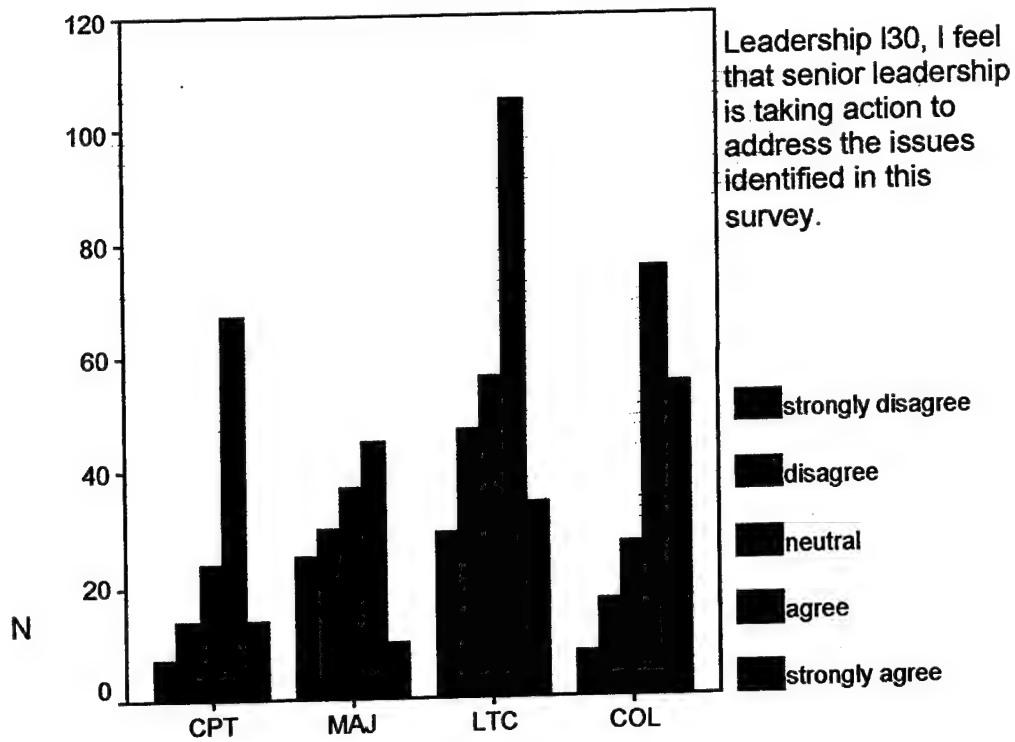
Demographics 39, Rank

Figure 3. Crosstabulation of Age and Feeling about Leadership Awareness of Identified Issues



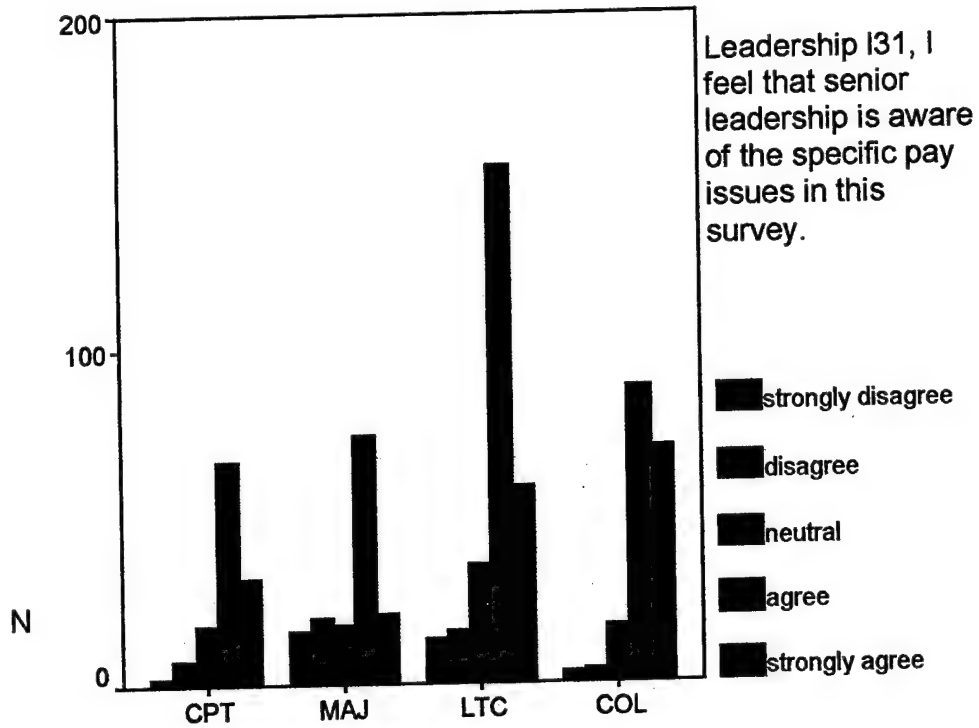
Demographics 39, Rank

Figure 4. Crosstabulation of Age and Feeling About Leadership Concern with Identified Issues



Demographics 39, Rank

Figure 5. Crosstabulation of Age and Feeling About Leadership Taking Action to Address Identified Issues



Demographics 39, Rank

Figure 6. Crosstabulation of Rank and Feeling About Leadership Awareness of Specific Pay Issues

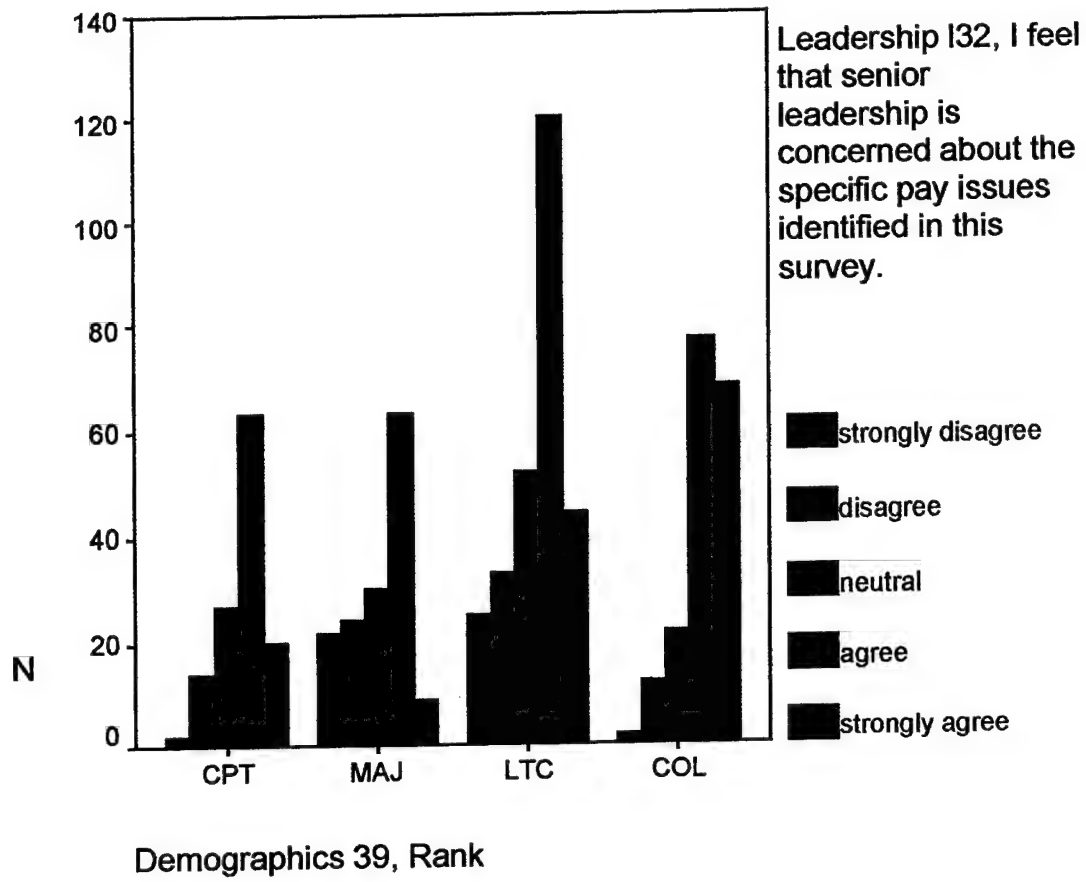


Figure 7. Crosstabulation of Rank and Leadership Concern with Specific Pay Issues

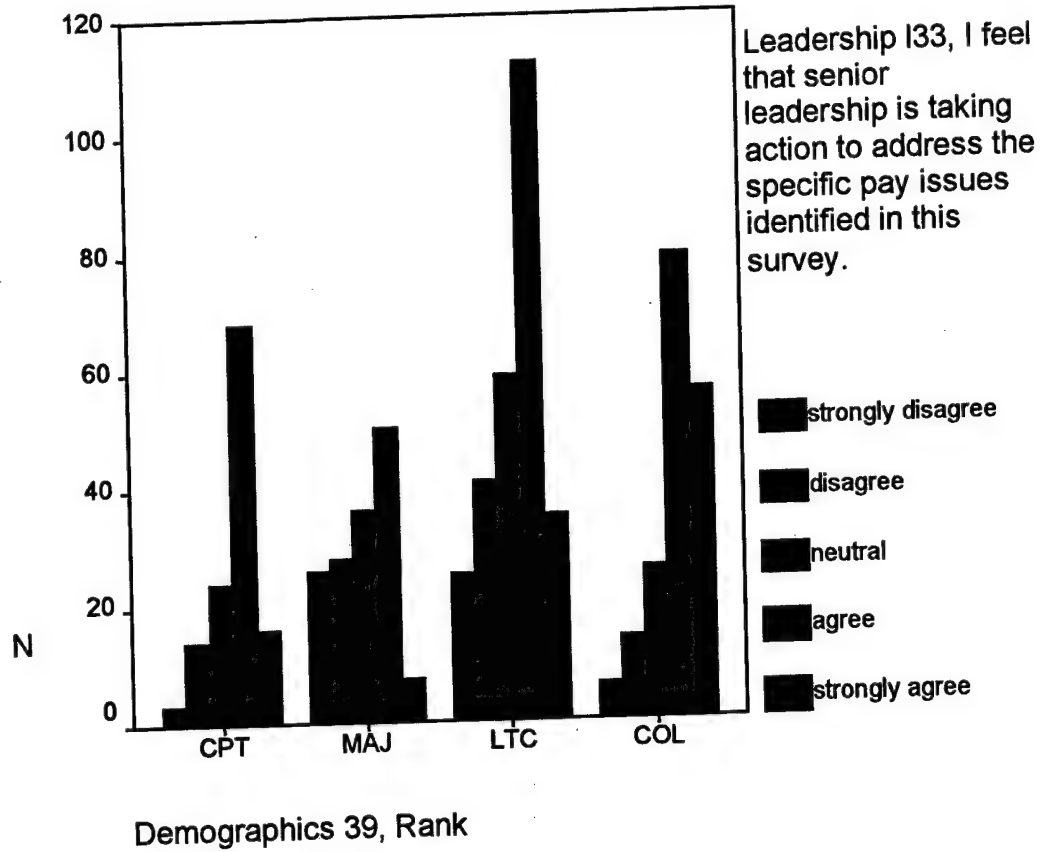


Figure 8. Crosstabulation of Rank and Feeling About Leadership Taking Action to Address Specific Pay Issues

Appendix E contains crosstabulations for leadership variables significantly related (at $p \leq .05$) to rank, AOC, age, type of unit, or gender. Total frequencies for all the leadership variables are presented in Table 11. The percentages indicate affirmative responses for "Yes-No" type variables, the combination of "Strongly agree/Agree" responses for L28-L33, and the combination of "Strong positive influence/Positive influence" response for the mentorship variable, CF14g.

Table 11.

Frequencies for the Leadership Variables

	% Strongly Agree/Agree	% Strong Positive/Positive Influence	% Yes
Feel leadership is aware of issues in the survey(L28)	75.6		
Feel leadership is concerned about the issues(L29)	63.5		
Feel leadership is taking action to address issues(L30)	55.3		
Feel leadership is aware of pay issues in the survey(L31)	76.6		
Feel leadership is concerned about pay issues(L32)	63.1		
Feel leadership is taking action to address pay issues(L33)	57.8		
Influence of mentorship on career planning(CF14g)		80.0	
Unaware leadership a reason to leave the ADCS			7.5
Poor clinic level leadership			4.3
Poor senior level leadership			5.1

The significant relationships (at $p \leq .01$) between the leadership variables and the locations are weak, and are shown in Table 12. Positive r-values do indicate a positive relationship, and negative values indicate an inverse relationship between variables. Officers assigned to non-clinical positions generally have a positive view of the leadership.

Table 12.

Correlation Values for Leadership Variables and Locations

	C	G	J	K	N	W
Feel leadership is aware of issues in the survey(L28)	ns	-.097*	ns	ns	.157**	ns
Feel leadership is concerned about the issues(L29)	ns	ns	ns	ns	.147**	ns
Feel leadership is taking action to address issues(L30)	ns	ns	ns	ns	.207**	ns
Feel leadership is aware of pay issues in the survey(L31)	ns	-.126**	ns	ns	.152**	ns
Feel leadership is concerned about pay issues(L32)	ns	-.098*	ns	ns	.161**	ns
Feel leadership is taking action to address pay issues(L33)	ns	ns	ns	-.105*	.213**	ns
Influence of mentorship on career planning(CF14g)	ns	ns	ns	ns	ns	ns
Unaware leadership a reason to leave the ADCS	ns	ns	ns	ns	ns	ns
Poor clinic level leadership	.189**	ns	.163*	ns	ns	ns
Poor senior level leadership	ns	ns	ns	ns	ns	.108*

** Significant at .001 level, * Significant at .01 level, C-Carson, G-Gordon, J-Japan, K-Korea, N-Non-Clinical, W-West Point

Discussion

In a time when retention and recruitment of dental officers is of vital concern to the ADCS and the Army, it is important to know what factors influence them to stay in the Army and to join the Army. The ten factors listed in Table 7 (page 33) most significantly influence dental officers' intent to stay in the Army. These most significant factors are related to pay, education and training, years of service, commitment, location, and the opportunity to moonlight.

Four of the factors are related to pay, with three of those related to special pay increases. Future special pay increases and special pay increases of 4-8K/YR and 8-12K/YR significantly influence dental officers to stay in the Army. The influence of special pay is not surprising since the survey was conducted about a year after the first special pay increase which targeted more junior officers, mostly captains, and board certified officers. Officers with between six and nine years of Dental Corps years of service (DCYOS), typically junior majors, benefited some, as did board certified officers. Officers with less than six years of DCYOS, typically captains, benefited most, and those with ten or more years did not benefit at all unless they were board certified. Clearly, special pay was an important and sensitive issue at the time this survey was conducted.

Table 13 shows how, as amounts of special pay increases increase, the percentage of officers reporting a "Strong Positive"/"Positive" influence on "Intent to stay in the Army" increases.

Table 13.

Influence of Special Pay Increases on Intent to Stay In the Army

	"Strong Positive"/"Positive" Influence
Special pay increase(1-4K/YR)	32%
Special pay increase(4-8K/YR)	66%
Special pay increase(8-12K/YR)	87%
Special pay increase(>12K/YR)	93%

The three most significant factors predictive of officers' intentions are not directly related to pay, but pay may be an issue connected to them also. First, Officers presently in an initial commitment are more likely to get out of the Army, and not make it a career. Only 38% of officers in their initial commitment are "Extremely likely"/"Likely" to stay in the Army compared to 62% of those not in their initial commitment. This may be the case because the income of officers in initial commitments, typically captains in rank, is the lowest of Army dental officers, far below the average salary for dentists in civilian practice, and they are more likely to have debts from dental school to repay.

Second, DCYOS is inversely related to officers' intent to stay in the Army. Further evaluation of this relationship is presented in Table 14, and shows the percentage, by DCYOS, of those officers "Extremely likely"/"Likely" to stay in the Army.

Table 14.

DCYOS and Intent to Stay in the Army

	"Extremely likely"/"Likely" to Stay in the Army
DCYOS 0-5	41%
DCYOS 6-11	85%
DCYOS 12-17	68%
DCYOS 18 and >	41%

Officers with 18 or more DCYOS either have already made the Army a career or can do so soon and retire. The 68% for the officers in the 12-17 DCYOS group indicates that about 32% may leave the Army before they reach 20 years, or at the 20 year point. The great majority of those in the 6-11 DCYOS group intend to stay in and make the Army a career. The surprising finding is that only 41% of the 0-5 DCYOS group, typically captains, intend to stay in; and nearly 60% intend to leave the Army.

Third, officers presently in dental specialty training programs intend to more likely stay in the Army. The coding for

this variable was 1 for "Yes", 2 for "No" so, the correlation value for this relationship is negative. Crosstabulations show that 85% of officers presently in specialty training programs are "Extremely likely"/"Likely" to stay in the Army, compared to 57% of officers not in programs. These officers do incur a year-for-year commitment as a result of receiving the educational benefit of the programs, however, they do not receive one of the specialty pays, the DASP, during the time in the programs. Providing more junior officer opportunities for specialty training may help increase the likelihood of retaining them in the Army.

The inclusion of the opportunity to moonlight as a significant factor influencing officers' intent to stay in the Army indicates that officers may need this option to supplement their income as an Army dental officer. It is, however, the more senior officers who have taken advantage of this option. Sixty-eight percent of those who have moonlighted have greater than 12 DCYOS, compared to 18% of those with less than six DCYOS.

Finally, two locations are included in the most significant factors influencing officers' intentions. West Point is inversely related to intent to stay in the Army, and Europe is directly related to intent. The reasons for these findings are not evident, but it may be a function of the DCYOS of those

assigned at these locations at the time of the survey.

One of the nine assigned at West Point had less than six DCYOS, four had between 12-17, and four had more than 18 DCYOS. The more senior officers may be retirement eligible or close to it, and intend to leave the Army. The relationship between Europe and intent to stay is positive. In Europe, 65% of those assigned are in the middle two DCYOS groups, 6-17 DCYOS, and this may be influencing intent rather than location itself. Ultimately, these findings would require further investigation to know the reasons.

Other variables found to significantly influence officers intentions that that need to be addressed include: the HPSP, Army life, frequency of moves, professional satisfaction, Esprit de Corps, and professional development.

The HPSP variable was coded 1 for "Yes", 2 for "No", so is inversely related to intent to stay in the Army. Those officers awarded a HPSP intend more likely to leave of the Army. Since the HPSP was not available for officers with DCYOS between about 6 and 15, the relationship with intent indicates the more senior officers who used the program intend more likely leave, probably when retirement eligible. Also, the younger officers who had scholarships intend more likely to leave. The HPSP is vital to recruiting, and the younger officers who had the program and intend to leave may have been much less likely to join had they

not had the scholarship. Once officers join the Army, whether on the HPSP or not, efforts must be made to retain them.

The influence of frequency of PCS moves was inversely related to intent to stay. Clearly, the more often officers are required to move their families and disrupt their lives, the more their perception of quality of life and family acceptance may decline. Less frequent opportunities to move to new locations and to travel, however, was a positive influence on officers' intent to stay. "Army life included as a reason for remaining in the ADCS" was directly related to intent to stay in the Army, and this variable included opportunities for travel and adventure. So, officers don't appear to be adverse to moving as long the PCS moves aren't too frequent.

The influence of professional satisfaction, professional development, and Esprit de Corps are all positively related to officers' intent to stay in the Army. Professional satisfaction stems from a good work environment, quality of dental practice, a general feeling of being in control of their practice, and a feeling of making a difference for their patients. Clearly, this helps to influence officers' intent to stay in the Army. Professional development, similarly, influences intent to stay, and involves professional growth through experiences and a commitment to continuing education. Esprit de Corps is unique to military dental practice when compared to other types of

dentistry. The feeling of working together for a common cause can have a great positive influence.

In the area of recruitment, clearly the opportunity for the Dental Corps to offer young dentists the AEGD-1 year program is advantageous to recruiting. It has had significantly more influence on younger officers' decisions to join the Army, and is considered to be of more value in the Army's recruiting effort by younger officers. The ADCS has a limited number of available positions in AEGD-1 year programs, but has been unable to fill them all in recent years. Currently, students in the HPSP are filling these positions after they graduate and come on active duty. Other students are eligible to apply, but most don't meet the application criteria.

Significantly fewer younger officers, compared to more senior officers, were in private practice prior to coming on active duty. This indicates that recruiting efforts are better directed at those in dental school, as opposed to those in private practice. Senior leaders are aware of this, and also realize that dental students have not yet made a commitment to private practice, nor have they been able to start to repay their student loans. Therefore, students, rather than practicing dentists, may be more likely to need some of the financial benefits the Army can offer, such as the 30K accession bonus or loan repayment assistance.

The opportunity for postgraduate education, or specialty training, was weakly related to increasing age. However, the write-in comments indicated that the opportunity for dental specialty training was the most frequently cited reason for joining the ADCS, at nearly 50%. This indicates that it is very important for recruiting. The Dental Corps has realized that specialty training is important for retaining officer and has begun to offer the opportunity to apply for these programs even to officers with less than three DCYOS. Previously, the requirement was to have three DCYOS in order to apply. An initiative being considered is to offer the opportunity to apply for these programs to senior dental students as a way to enhance recruiting (Hayes, 1998).

Travel opportunities was the second most cited reason for joining the ADCS, at 44%, but this was not significantly related to any of the five selected demographic variables. However, fewer of the younger officers, those between 25-30 years of age, listed travel opportunities as a reason to join the Army. Figure 9 illustrates this, indicating that marketing the opportunity to travel to younger people may not be as productive in recruiting as once thought.

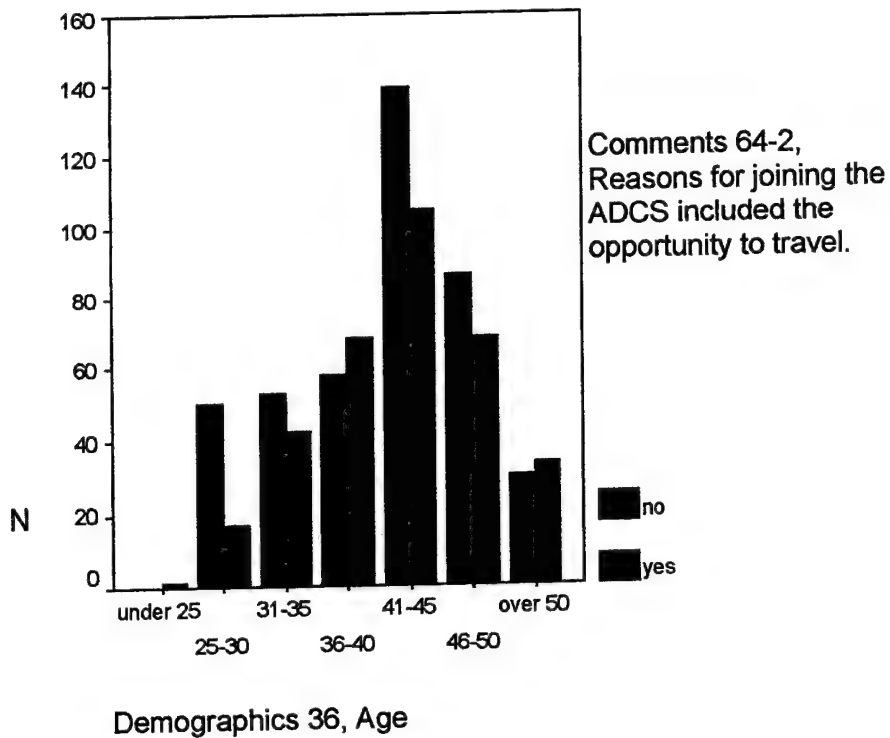


Figure 9. Crosstabulation of Age and Travel Opportunities as a Reason for Joining the ADCS

The opportunity to gain clinical experience was the third most cited reason for joining the ADCS, at 31%, and was not significantly related to the selected variables. Quality of practice, as a reason for joining, was only cited by 14% overall, and was significantly, directly related to increasing age and rank. So, although clinical experience and quality of practice should be conveyed to dentists during recruiting efforts, they may not deserve major marketing emphasis.

In the area of leadership, first it is important to note that only one leadership variable was significantly related to officers' intent to stay in the Army, and it was among the five

weakest related variables. So, leadership has only a very weak influence on officers' intentions.

With majors and lieutenant colonels among those more unlikely to benefit from the special pay increases provided before this survey was conducted, it's not surprising they are more likely to strongly disagree or disagree with the statements about the leadership being aware, concerned, and taking action on issues. Majors were most dissatisfied with the leadership. As a group, they strongly agreed or agreed about 12% less than all officers that the leadership was aware of issues, including pay. They strongly agreed or agreed about 16% less that the leadership was concerned with the issues. And, they strongly agreed or agreed about 20% less that the leadership was taking action to address the issues. Due to the timing of this survey, the issue of pay probably took precedence, and may have overshadowed other issues. Although majors seemed to be the group most dissatisfied with the leadership, this did not significantly influence their decisions to stay in or leave the Army. Majors typically have between six and eleven DCYOS, and 85% of this group reported they were extremely likely or likely to stay in the Army.

I know senior leaders dealing with pay and other issues were aware, concerned, and making a great effort to address those issues. Possibly a lack of communication, or disruption in the lines of communication, prevented all officers from receiving updates on the actions being taken at senior leader levels. The

Dental Corps newsletter was on-line at this time, but many may not have had access to it and the information.

One leadership variable was extremely promising. Eighty percent of officers felt that mentorship had either a strong positive or positive influence on their career planning. The mentorship program for junior officers and dental students on the HPSP is receiving great emphasis from the senior leadership, and appears to be very worthwhile for recruiting and retention.

The leadership variables correlated negatively with five locations. At Carson, Japan, Korea, and West Point only one variable was involved with each location. Assignment at West Point, however, also appeared as one of the most salient variables influencing officers' intent to leave the Army. The small number of officers at this location has already been presented. Three leadership variables correlated negatively with assignment at Gordon, however, Gordon also was significantly, positively related to intent to stay in the Army. This diametric relationship presents an unexplainable finding.

Dental officers assigned to non-clinical positions, that is administrative and special assignment positions, had a positive view of the Dental Corps leadership. Those in these types of positions are typically more senior and may be more likely to have open lines of communication enabling them to know the actions and efforts of the leadership.

Conclusions and Recommendations

The first part of the research question was as follows: What were the most significant factors that influenced Army Dental Corps officers' decisions to remain in or leave the service? The second part of the research question: What were the significant factors that influenced Dental Corps officers to join the service, or factors that they believe influence officers to join today? The third part of the research question: How did Dental Corps officers feel about the leadership of the Dental Corps?

Four of the most significant factors influencing officers' decisions to stay in or leave the Army were expected based on the preliminary study of this survey (Cook, et al., 1997). Officers presently in an initial commitment in the ADCS are more likely to leave the Army. Officers presently in dental specialty training programs are more likely to stay in the Army. Increases in special pay and possible future increases in special pay influence officers to stay in, also. DCYOS was found to influence officers' decisions in this study, rather than AFS, which was found in the preliminary study. These two variables are highly correlated, and officers with low or high DCYOS are similarly more likely to leave the Army. Officers having from six to eleven DCYOS are most likely to stay in the Army, and those having from 12 to 17 are next most likely to stay.

Additional variables were also found to be included with those most significantly influencing officers' decisions. The

opportunity to moonlight was significantly related to officers' intentions to leave the Army. One of the write-in responses, "Low pay included in the reasons for leaving the ADCS", was found to significantly influence officers' to leave the Army. Also, two locations, Europe and West Point, were significantly related to officers' intentions. Europe was related to officers' intentions to stay in, and West Point to officers' intentions to leave the Army. The reasons for these relationships were undeterminable from the study data.

The most significant variables, as expected from the literature, were related to pay, training and education, and chronological factors. Other significantly related factors were related to those categories, and to job satisfaction and quality of life, as expected from the literature and the preliminary study. These were presented in Table 8 and in the discussion.

New variables found to be significantly related to officers' decisions included a few locations and one leadership variable. Variables not found to be significantly related to officers' intentions were age, gender, rank, marital status, AOC, type of unit, travel opportunities, and any additional comments.

Clearly, special pay increases will continue to be important for retention of dental officers and they should be kept in mind for the future. However, communication should be made clear, and everyone should realize that any additional tri-service efforts to increase special pay in the next five years would not likely be successful. The primary efforts of the Army Dental

Corps, regarding pay, should focus on funding the already approved, Dental Officer Multi-year Retention Bonus (DOMRB) for all specialties. The DOMRB was established with the National Defense Authorization Act of Fiscal Year 1998, but implementation was dependent on the availability of funds (Martin, 1997). The Army Dental Corps is currently able to fund this program for limited specialties.

This study confirms the benefit of providing dental specialty training opportunities to younger officers. Efforts should continue to accept eligible officers, who are in their initial commitment and otherwise more likely to leave, into specialty programs before the end of that initial commitment. Once in specialty programs, officers are more likely to stay in the Army.

Efforts should be made to reduce the frequency of PCS moves for dental officers, to the extent this is possible and still meet the needs of assignment requirements and the Army. Moving too frequently generally influences officers to be more likely to leave the Army.

This study does not explain the relationship between assignment locations and officers' intentions to stay in or leave the Army. Further investigation into this area is necessary in order to make any conclusions related to locations and intentions.

Since this survey was conducted before the more recent increase in special pay, the influence of that increase on officers' intentions and feelings is not reflected in the

results of this study. A similar study of active duty dental officers would be beneficial to record the effects of the recent special pay increase. It would be best, and most efficient, to delay such a study until after funding is available to fully implement the Dental Officer Multi-year Retention Bonus. This would allow for the incorporation of the influence that all pay changes have on officers' decisions to stay in or leave the Army. The survey could be planned for either Fiscal Year 1999 or Fiscal Year 2000, if the DOMRB is fully implemented by that time.

The only leadership variable significantly related to officers' intentions was "Feeling that senior leadership is 'taking action to address issues'". It influenced officers' decisions positively, but weakly. So, leadership had little influence on officers' intentions. None of the write-in responses related to leadership were found to be significant. Negative feelings about leadership were closely related to the group of officers least likely to benefit from the special pay increase preceding the survey. Since these officers did benefit from the more recent pay increase, this group's feelings about the leadership would likely be more positive in future surveys.

The significant relationship between leadership and the five locations is unexplainable and inconclusive. Further investigation is needed to determine why the feelings about the senior leadership varies among some locations. Since officers assigned to administrative and special assignment positions were more likely to view the leadership in a positive light, and the

influence of mentorship was overwhelmingly positive, more direct communication may help enhance officers' perception of the leadership. Younger officers, especially, are in need of direct communication and meaningful mentorship simply as a result of the generation to which they belong. This study confirms the value and importance of the mentorship program, and it is recommended that it should continue to receive command emphasis.

The most significant variable related to recruitment was the influence of the AEGD-1 program on more junior officers. This program should be marketed extensively in the effort to recruit new dental officers. With two new Army AEGD-1 program sites in Germany and Hawaii, it is imperative the Dental Corps does everything possible to fill all of its available positions in AEGD-1 programs. This study also shows that significantly fewer, younger officers were in private practice prior to coming on active duty. This indicates that recruiting efforts may be more efficient when directed at those students in dental school, rather than those already in private practice.

The HPSP was significantly related to younger officers' reasons for joining the ADCS. Clearly, this program is essential to the Army's recruiting effort. This program needs to be marketed to the widest audience, and increasing the number of available scholarships should be thoroughly investigated.

Write-in comments from the survey indicated that the opportunity for dental specialty training was an important reason for joining the ADCS. The initiative to consider

allowing senior dental students to apply for Army specialty training programs is an exciting and forward-thinking approach to enhance recruiting. A pilot test in this area would certainly be worthwhile.

The opportunity to travel, while a popular reason for many officers to join the ADCS, was not as important for younger officers. The opportunity to gain clinical experience and the quality of practice were not significantly related to younger or older officers. They can not be overlooked in recruiting efforts, but they probably shouldn't be the primary marketing points.

Finally, it is important to consider the age of the individuals that the Dental Corps is currently attempting to recruit. Freshman dental students are about 23, and seniors about 26 years of age. This places them in the generation X category, people born between the years of 1963 and 1977. As alluded to earlier, these individuals have different expectations of supervisors and different attitudes concerning employment and careers. They are less likely to take things on face value. They require direct communication, explanations that make sense, and valid reasons why something needs to be done or why something needs to be done in a particular way. They prefer employment that allows some degree of freedom to accomplish goals, and that can provide personal and professional growth programs. They value meaningful mentorship and personal contact that involves positive feedback (O'Donovan, 1997).

With this in mind, recruiting and retention efforts can be formulated and implemented in ways that have the best chance for success. However, those of generation X generally do not see themselves as having a one-career life. They have a propensity to hold multiple jobs for shorter periods of time. They value experiences and training that enhances their marketability in a fluid job market (Whetstone, 1997).

Recruiting efforts should be open and honest, and limited primarily to the advantages the ADCS can offer young dentists during the initial commitment. Talk of security and retirement benefits of a twenty-year career in the Army will only fall on deaf ears. Even advantages of special pay increases after six or eight years are of little concern to these individuals. I am confident those interfacing with prospective, young Army dentists are fully aware of the uniqueness of recruiting Generation Xers.

Once officers have been recruited and they enter active duty, efforts to retain them, similarly should not be long term, but focus primarily on the next obligation period. Advantages of the ADCS beyond the next obligation period may not be of particular interest to young dentists. Clearly, open, honest, and direct communication will provide the best working relationship with all officers in the Dental Corps. An understanding of the findings in this study, coupled with a personable approach to recruiting and retaining quality dental officers should help serve the Dental Corps well.

Appendix A	U.S. Military Dental Special Pay
Appendix B	Frequencies for Variables
Appendix C	Dental Officer Recruitment and Retention Survey
Appendix D	Crosstabulations for Recruiting Variables
Appendix E	Crosstabulations for Leadership Variables

References

Agho, A., Mueller, C. & Price, J. (1993). Determinants of Employee Job Satisfaction: An Empirical Test of a Causal Model. Human Relations, Vol. 46, 1007-1027.

Baine, D., (1990). Defense Health Care: Military Physicians' Views on Military Medicine (GAO/HRD-90-1). Washington D.C.: U.S. Government Printing Office.

Barrett, S., American Organization of Nurse Executives (1990). 1990 National Nurse Manager Study (AONE Catalog No. 154192). Chicago: American Hospital Association.

Blankertz, L. & Robinson, S. (1997). Turnover Intentions of Community Mental Health Workers in Psychosocial Rehabilitation Services. Community Mental Health Journal, Vol. 33, No. 6, 517-529.

Blount, B., LeClair, B., Miser, W., Schirner, W., Weightman, G., & Jones, R. (1995). Army Family Physician Satisfaction. Military Medicine, Vol. 160, 501-505.

Brennand, T. (1991). Correlates of Physician Retention at Tripler Army Medical Center. Unpublished graduate management project, Baylor University.

Carino, M. (1995). Factors which influence military career planning [WWW document]. <http://www.armymedicine.army.mil/dencom/dcbranch/Doc95.html>

Carino, M. & Nasser, F. (1997). Factors which influence military career planning [WWW document]. <http://www.armymedicine.army.mil/dencom/dcbranch/Doc97.html>

Cook, J., Goodman, R., Jennings, N., & McClary, M.
(1997). Predictors of Retention of Dental Officers in the Army.
Unpublished Research Methods paper, Baylor University.

Cooper, D. & Emory, C. (1995). Business Research Methods
(5th ed.). Chicago: McGraw-Hill, Inc.

DeMicco, F. & Olsen, M. (1988). The relationship of work
satisfaction and organizational commitment to retirement
intention. Journal of the American Dietetic Association, Vol.
88, 921-927.

Franco, R. (1989). A Multivariate Analysis of Navy Physician
Retention. Unpublished masters thesis, Naval Postgraduate
School.

Gurney, C., Mueller, C., & Price, J. (1997). Job
Satisfaction and Organizational Attachment of Nurses Holding
Doctoral Degrees. Nursing Research, Vol. 46, 163-171.

Hayes, R. (1998). Graduate Dental Education Update.
Association of Military Surgeons of the United States, 105th
Annual Meeting. San Antonio, Texas.

Jac, F. (1997). It's costly to lose good employees. In
Solomon, C., Keep Them: Don't let your best people get away (pp.
50-51). Workforce, August.

Joseph, S. (1997, January). Dental officer special pay [WWW
document]. <http://www.ha.osd.mil/cs/dent9708.html>

Joseph, S. (1997, January). Dental officer accession bonus
[WWW document]. <http://www.ha.osd.mil/cs/dent9721.html>

Kim, S., Price, J., Mueller, C., & Watson, T. (1996). The Determinants of Career Intent among Physicians at a U.S. Air Force Hospital. Human Relations, Vol. 49, No. 7, 947-976.

Kravitz, R., Thomas, N., Sloss, E., & Hosek, S. (1993). Satisfaction and Dissatisfaction in Institutional Practice: Results from a Survey of U.S. Military Physicians. Military Medicine, Vol. 158, 41-51.

Lange, A., Loupe, M., & Meskin, L. (1982). Professional satisfaction in dentistry. Journal of the American Dental Association, Vol. 104, 619-624.

Mangelsdorff, A. (1984). Issues Affecting Army Psychologists' Decisions to Remain in the Services: A Follow-Up Study. Professional Psychology: Research And Practice, Vol. 15, No. 4, 544-552.

Mangelsdorff, A. (1989). A Cross-Validation Study of Factors Affecting Military Psychologists' Decisions to Remain in Service: The 1984 Active Duty Psychologists Survey. Military Psychology, Vol. 1, No. 4, 241-251.

Mangelsdorff, A., Twist, P., Zucker, K., Ware, J., George, J., & McFarling, D. (1992). Physician and Dentist Survey: Desert Storm and Military Medicine (Health Care Studies and Clinical Investigation Activity Consultation Report CR92-004A). Ft. Belvoir, VA: Defense Technical Information Center.

Martin, E. (1997, December 30). Implementation Policy for the Dental Officer Multiyear Retention Bonus [WWW document]. <http://ww2.tricare.osd.mil/hso/bonus9805.html>

McPhee, S. & Townsend, L. (1992). A Study of Organizational Commitment and Job Satisfaction Among Air Force Occupational Therapy Officers. Military Medicine, Vol. 157, 117-121.

Mobley, W. (1982). Employee Turnover: Causes, Consequences, and Control. Reading, Mass.: Addison-Wesley.

Mueller, C., Boyer, E., Price, J., & Iverson, R. (1994). Employee Attachment and Noncoercive Conditions of Work: The Case of Dental Hygienists. Work And Occupations, Vol. 21, No. 2, 179-212.

Mueller, C. & Price, J. (1989). Some Consequences of Turnover: A work Unit Analysis. Human Relations, Vol. 42, 389-402.

O'Donovan, C. (1997). The X Styles. International Association of Business Communicators [WWW document].
<http://www.file:A:\retainingXers.htm>

Parasuraman, S. (1989). Nursing Turnover: An Integrated Model. Research in Nursing & Health, Vol. 12, 267-277.

Price, J. (1989). The Impact of Turnover on the Organization. Work and Occupations, Vol. 16, 461-473.

Price, J. & Kim, S. (1993). The Relationship between Demographic Variables and Intent to Stay in the Military: Medical personnel in a U.S. Air Force Hospital. Armed Forces & Society, Vol. 20, 125-144.

Price, J. & Mueller, C. (1981). Professional Turnover: The Case of Nurses. New York: Spectrum Publications, Inc.

Price, J. & Mueller, C. (1986). Absenteeism and Turnover of Hospital Employees. Greenwich: JAI Press Inc.

Radtka, S. (1993). Predictors of Physical Therapy Faculty Job Turnover. Physical Therapy, Vol. 73, No. 4, 243-251.

Reineck, C. (1990). Factors that contribute to anticipated turnover among civilian registered nurses employed in United States hospitals. Unpublished doctoral dissertation, University of Maryland at Baltimore.

Shanahan, M. (1993). A comparative analysis of recruitment and retention of health care professionals. Health Care Management Review, Vol. 18, 41-51.

Solomon, C. (1997). Keep Them: Don't let your best people get away. Workforce, August, 46-52.

Steinweg, K. (1994). Retention Rates and Retention Predictors among Graduates of Army Family Practice Residency Programs. Military Medicine, Vol. 159, 516-519.

Taylor, D. (1991). Comparison of Civilian and Navy Pay for Dentists (CRM 91-20). Alexandria, Virginia: Center For Naval Analyses.

Ulschak, F. & SnowAntle, S. (1992). Managing Employee Turnover: A Guide for Health Care Executives. Chicago: American Hospital Publishing, Inc.

Wakefield, D., Curry, J., Price, J., Mueller, C., & McCloskey, J. (1988). Differences in Work Unit Outcomes: Job Satisfaction, Organizational Commitment, and Turnover Among Hospital Nursing Department Employees. Western Jounran of Nursing Research, Vol. 10, 98-105.

Whetstone, S. (1997). Generation X-ers Get NAKED on the Job [WWW document].
[http://www.gateway.unomaha.edu/GatewayWWW/The_Issues/Spring 1997/16 7mar97/cover naked.htm](http://www.gateway.unomaha.edu/GatewayWWW/The_Issues/Spring_1997/16_7mar97/cover_naked.htm)

Zaloznik, A. (1994). Retention of Internal Medicine Physicians in the U.S. Army. Military Medicine, Vol. 159, 520-523.

Variable Special Pay (VSP) is paid on a monthly basis and is listed on the LES as "Dental Pay." The annual rates for the VSP are illustrated below:

Years of Completed Creditable Service	Old VSP Annual Rate	New VSP Annual Rate (1 Oct 1996)
Less than 3	\$1,200	\$ 3,000
3 thru 5	\$2,000	\$ 7,000
6 thru 9	\$4,000	\$ 7,000
10 thru 13	\$6,000	\$ 6,000
14 thru 17	\$4,000	\$ 4,000
18 or more	\$3,000	\$ 3,000
General Officers	\$1,000	\$ 1,000

Dental Additional Special Pay (DASP) is paid annually to Dental Corps officers who are not participating in their initial residency training. Entitlement to pay is contingent upon execution of a legally binding written agreement to remain on active duty for one year beginning on the effect date of the agreement. The annual rates for DASP are illustrated below:

Years of Completed Creditable Service	Old DASP Annual Rate	New DASP Annual Rate (1 Oct 1996)
Less than 3	\$0	\$ 4,000
3 thru 9	\$6,000	\$ 6,000
10 thru 13	\$6,000	\$ 6,000
14 thru 18	\$8,000	\$ 8,000
18 or more	\$10,000	\$10,000

Board Certification Pay (BCP) is paid to all board certified dental officers upon date of certification. Amount is determined based upon years of creditable service, which establishes your HPPED, and is paid on a monthly basis. General Officers receive a flat rate without regard to creditable service. Officer must submit board certification letter or certificate through their unit personnel office to the AMEDD Special Pay Branch to initiate pay.

Years of Completed Creditable Service	Old BCP Annual Rate	New BCP Annual Rate (1 Oct 1996)
Less than 3	\$2,000	\$ 2,500
3 thru 9	\$2,000	\$ 2,500
10 thru 11	\$2,000	\$ 3,500
12 thru 13	\$3,000	\$ 4,000
14 thru 17	\$3,000	\$ 5,000
18 or more	\$4,000	\$ 6,000

Variable Special Pay (VSP) is paid on a monthly basis and is listed on the LES as "Dental Pay." The annual rates for the VSP are illustrated below:

Years of Completed Creditable Service	VSP Rate
Less than 3	\$ 3,000
3 thru 8	\$ 7,000
8 thru 12	\$ 12,000
12 thru 14	\$10,000
14 thru 18	\$ 9,000
18 or more	\$ 8,000
General Officers	\$ 7,000

Dental Additional Special Pay (DASP) is paid annually to Dental Corps officers who are not participating in their initial residency training. Entitlement to pay is contingent upon execution of a legally binding written agreement to remain on active duty for one year beginning on the effect date of the agreement. The annual rates for DASP are illustrated below:

Years of Completed Creditable Service	DASP Rate
Less than 3	\$ 4,000
3 thru 10	\$ 6,000
10 or more	\$ 15,000

Board Certification Pay (BCP) is paid to all board certified dental officers upon date of certification. Amount is determined based upon years of creditable service, which establishes your HPPED, and is paid on a monthly basis. General Officers receive a flat rate without regard to creditable service. Officer must submit board certification letter or certificate through their unit personnel office to the AMEDD Special Pay Branch to initiate pay.

Years of Completed Creditable Service	Board Certification Pay
Less than 3	\$ 2,500
3 thru 9	\$ 2,500
10 thru 11	\$ 3,500
12 thru 13	\$ 4,000
14 thru 17	\$ 5,000
18 or more	\$ 6,000
General Officer	\$ 6,000

Frequencies

Appendix B

Dependent Variable: Intent, Intent to stay in the Army and make the Army a career

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	17	2.2	2.5	2.5
	2	145	19.0	21.4	23.9
	3	111	14.5	16.3	40.2
	4	236	30.8	34.8	75.0
	5	170	22.2	25.0	100.0
	Total	679	88.8	100.0	
Missing	System Missing	86	11.2		
	Total	86	11.2		
Total		765	100.0		

Career Intentions 1, I intend to make the Army a career

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	extremely unlikely	66	8.6	9.5	9.5
	unlikely	53	6.9	7.6	17.0
	neutral	60	7.8	8.6	25.6
	likely	120	15.7	17.2	42.8
	extremely likely	399	52.2	57.2	100.0
	Total	698	91.2	100.0	
Missing	System Missing	67	8.8		
	Total	67	8.8		
Total		765	100.0		

Career Intentions 3, I intend to leave after completion of my present tour

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	extremely unlikely	232	30.3	35.8	35.8
	unlikely	152	19.9	23.5	59.3
	neutral	70	9.2	10.8	70.1
	likely	77	10.1	11.9	81.9
	extremely likely	117	15.3	18.1	100.0
	Total	648	84.7	100.0	
Missing	System Missing	117	15.3		
	Total	117	15.3		
Total		765	100.0		

Career Intentions 4, I intend to leave in less than 3 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	extremely unlikely	218	28.5	34.4	34.4
	unlikely	155	20.3	24.4	58.8
	neutral	72	9.4	11.4	70.2
	likely	63	8.2	9.9	80.1
	extremely likely	126	16.5	19.9	100.0
	Total	634	82.9	100.0	
Missing	System Missing	131	17.1		
	Total	131	17.1		
Total		765	100.0		

Career Intentions 5, I intend to leave in 3 or 4 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	extremely unlikely	170	22.2	29.9	29.9
	unlikely	141	18.4	24.8	54.7
	neutral	80	10.5	14.1	68.7
	likely	91	11.9	16.0	84.7
	extremely likely	87	11.4	15.3	100.0
	Total	569	74.4	100.0	
Missing	System Missing	196	25.6		
	Total	196	25.6		
Total		765	100.0		

Career Intentions 6, I intend to leave in 5 or more years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	extremely unlikely	147	19.2	27.1	27.1
	unlikely	78	10.2	14.4	41.4
	neutral	82	10.7	15.1	56.5
	likely	88	11.5	16.2	72.7
	extremely likely	148	19.3	27.3	100.0
	Total	543	71.0	100.0	
Missing	System Missing	222	29.0		
	Total	222	29.0		
Total		765	100.0		

Career Influences 14a, Quality of life

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	35	4.6	4.6	4.6
	strong negative influence	113	14.8	15.0	19.7
	no influence	63	8.2	8.4	28.0
	positive influence	349	45.6	46.3	74.4
	strong positive influence	193	25.2	25.6	100.0
	Total	753	98.4	100.0	
Missing	System Missing	12	1.6		
	Total	12	1.6		
Total		765	100.0		

Career Influences 14b, Family acceptance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	43	5.6	6.1	6.1
	negative influence	110	14.4	15.5	21.6
	no influence	109	14.2	15.4	37.0
	positive influence	265	34.6	37.4	74.3
	strong positive influence	182	23.8	25.7	100.0
	Total	709	92.7	100.0	
Missing	System Missing	56	7.3		
	Total	56	7.3		
Total		765	100.0		

Career Influences 14c, Pay

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	153	20.0	20.2	20.2
	negative influence	226	29.5	29.9	50.1
	no influence	77	10.1	10.2	60.3
	positive influence	182	23.8	24.1	84.4
	strong positive influence	118	15.4	15.6	100.0
	Total	756	98.8	100.0	
Missing	System Missing	9	1.2		
	Total	9	1.2		
Total		765	100.0		

Career Influences 14d, Professional Development

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	18	2.4	2.4	2.4
	negative influence	39	5.1	5.1	7.5
	no influence	36	4.7	4.7	12.2
	positive influence	374	48.9	49.1	61.3
	strong positive influence	295	38.6	38.7	100.0
	Total	762	99.6	100.0	
Missing	System Missing	3	.4		
	Total	3	.4		
Total		765	100.0		

Career Influences 14e, Professional satisfaction (dentistry)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	24	3.1	3.2	3.2
	negative influence	57	7.5	7.5	10.6
	no influence	54	7.1	7.1	17.7
	positive influence	344	45.0	45.2	62.9
	strong positive influence	282	36.9	37.1	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Total	4	.5		
Total		765	100.0		

Career Influences 14f, Postdoctoral training

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong neagative influence	15	2.0	2.1	2.1
	negative influence	17	2.2	2.4	4.5
	no influence	83	10.8	11.6	16.0
	positive influence	256	33.5	35.7	51.7
	strong positive influence	347	45.4	48.3	100.0
	Total	718	93.9	100.0	
Missing	System Missing	47	6.1		
	Total	47	6.1		
Total		765	100.0		

Career Influences 14g, Mentorship

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	22	2.9	2.9	2.9
	negative influence	36	4.7	4.8	7.8
	no influence	91	11.9	12.2	19.9
	positive influence	369	48.2	49.3	69.3
	strong positive influence	230	30.1	30.7	100.0
	Total	748	97.8	100.0	
Missing	System Missing	17	2.2		
	Total	17	2.2		
Total		765	100.0		

Career Influences 14h, Military duty assignments

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	39	5.1	5.2	5.2
	negative influence	113	14.8	15.0	20.2
	no influences	133	17.4	17.7	37.9
	positive influence	337	44.1	44.8	82.7
	strong positive influence	130	17.0	17.3	100.0
	Total	752	98.3	100.0	
Missing	System Missing	13	1.7		
	Total	13	1.7		
Total		765	100.0		

Career Influences 14i, Military training

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	70	9.2	10.2	10.2
	negative influence	66	8.6	9.6	19.9
	no influence	415	54.2	60.7	80.6
	positive influence	99	12.9	14.5	95.0
	strong positive influence	34	4.4	5.0	100.0
	Total	684	89.4	100.0	
Missing	System Missing	81	10.6		
	Total	81	10.6		
Total		765	100.0		

Career Influences 14j, Sense of duty

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	8	1.0	1.1	1.1
	negative influence	8	1.0	1.1	2.1
	no influence	200	26.1	26.4	28.5
	positive influence	409	53.5	53.9	82.3
	strong positive influence	134	17.5	17.7	100.0
	Total	759	99.2	100.0	
Missing	System Missing	6	.8		
	Total	6	.8		
Total		765	100.0		

Career Influences 14k, Esprit de corps

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	31	4.1	4.1	4.1
	negative influence	48	6.3	6.3	10.4
	no influence	178	23.3	23.4	33.8
	positive influence	394	51.5	51.8	85.5
	strong positive influence	110	14.4	14.5	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Total	4	.5		
Total		765	100.0		

Career Influences 14l, Possibility of tactical deployment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	159	20.8	21.1	21.1
	negative influence	217	28.4	28.9	50.0
	no influence	289	37.8	38.4	88.4
	positive influence	68	8.9	9.0	97.5
	strong positive influence	19	2.5	2.5	100.0
	Total	752	98.3	100.0	
Missing	System Missing	13	1.7		
	Total	13	1.7		
Total		765	100.0		

Career Influences 14m, Travel

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	16	2.1	2.1	2.1
	negative influence	45	5.9	5.9	8.0
	no influence	132	17.3	17.4	25.5
	positive influence	386	50.5	50.9	76.4
	strong positive influence	179	23.4	23.6	100.0
	Total	758	99.1	100.0	
Missing	System Missing	7	.9		
	Total	7	.9		
Total		765	100.0		

Career Influences 14n, Frequency of moves

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	174	22.7	22.9	22.9
	negative influence	327	42.7	43.1	66.0
	no influence	147	19.2	19.4	85.4
	positive influence	90	11.8	11.9	97.2
	strong positive influence	21	2.7	2.8	100.0
	Total	759	99.2	100.0	
Missing	System Missing	6	.8		
	Total	6	.8		
Total		765	100.0		

Career Influences 14o, Opportunity to "moonlight"

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	37	4.8	5.5	5.5
	negative influence	39	5.1	5.8	11.3
	no influence	384	50.2	56.9	68.1
	positive influence	145	19.0	21.5	89.6
	strong positive influence	70	9.2	10.4	100.0
	Total	675	88.2	100.0	
Missing	System Missing	90	11.8		
	Total	90	11.8		
Total		765	100.0		

Career Influences 14p, Employment opportunities for your spouse

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	127	16.6	19.4	19.4
	negative influence	168	22.0	25.7	45.1
	no influence	235	30.7	35.9	81.0
	positive influence	68	8.9	10.4	91.4
	strong positive influence	56	7.3	8.6	100.0
	Total	654	85.5	100.0	
Missing	System Missing	111	14.5		
	Total	111	14.5		
Total		765	100.0		

Career Influences 15, Influence the recent special pay increase will have on your military career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	92	12.0	12.4	12.4
	negative influence	81	10.6	10.9	23.3
	no influence	395	51.6	53.2	76.4
	positive influence	148	19.3	19.9	96.4
	string positive influence	27	3.5	3.6	100.0
	Total	743	97.1	100.0	
Missing	System Missing	22	2.9		
	Total	22	2.9		
Total		765	100.0		

Career Influences 16, Influence that future special pay increases will have on your military career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	21	2.7	3.0	3.0
	negative influence	18	2.4	2.6	5.6
	ni influence	220	28.8	31.7	37.4
	positive influence	312	40.8	45.0	82.4
	strong positive influence	122	15.9	17.6	100.0
	Total	693	90.6	100.0	
Missing	System Missing	72	9.4		
	Total	72	9.4		
Total		765	100.0		

Career Influences 17a, Influence an additional increase in pay of \$1K to \$4K per year will have on your career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	48	6.3	6.7	6.7
	negative influence	52	6.8	7.3	14.0
	no influence	446	58.3	62.6	76.7
	positive influence	140	18.3	19.7	96.3
	strong negative influence	26	3.4	3.7	100.0
	Total	712	93.1	100.0	
Missing	System Missing	53	6.9		
	Total	53	6.9		
Total		765	100.0		

Career Influences 17b, Influence an additional increase in pay of \$4K to \$8K per year will have on your career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	26	3.4	3.6	3.6
	negative influence	28	3.7	3.9	7.6
	no influence	281	36.7	39.4	46.9
	positive influence	319	41.7	44.7	91.6
	strong positive influence	60	7.8	8.4	100.0
	Total	714	93.3	100.0	
Missing	System Missing	51	6.7		
	Total	51	6.7		
Total		765	100.0		

Career Influences 17c, Influence an additional increase in pay of \$8K to \$12K per year will have on your career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	17	2.2	2.4	2.4
	negative influence	8	1.0	1.1	3.5
	no influence	133	17.4	18.5	21.9
	positive influence	319	41.7	44.3	66.3
	strong positive influence	243	31.8	33.8	100.0
	Total	720	94.1	100.0	
Missing	System Missing	45	5.9		
	Total	45	5.9		
Total		765	100.0		

Career Influences 17d, Influence of an additional increase in pay in excess of \$12K per year will have on your career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	3	.4	.4	.4
	no influence	52	6.8	7.1	7.5
	positive influence	155	20.3	21.1	28.6
	strong positive influence	524	68.5	71.4	100.0
	Total	734	95.9	100.0	
Missing	System Missing	31	4.1		
	Total	31	4.1		
Total		765	100.0		

Career Influences 19, Influence that the opportunity for postgraduate education has (had) on your military career planning

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strong negative influence	13	1.7	1.8	1.8
	negative influence	22	2.9	3.0	4.8
	no influence	92	12.0	12.6	17.4
	positive influence	267	34.9	36.6	54.0
	strong positive influences	335	43.8	46.0	100.0
	Total	729	95.3	100.0	
Missing	System Missing	36	4.7		
	Total	36	4.7		
Total		765	100.0		

Recruitment r20, Value that the opportunity for postgraduate education had on your decision to join the Army

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	65	8.5	8.7	8.7
	little value	46	6.0	6.2	14.9
	neutral	123	16.1	16.5	31.3
	some value	195	25.5	26.1	57.4
	high value	318	41.6	42.6	100.0
	Total	747	97.6	100.0	
Missing	System Missing	18	2.4		
	Total	18	2.4		
Total		765	100.0		

Recruitment r21, Value that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	11	1.4	1.5	1.5
	little value	62	8.1	8.5	10.0
	neutral	80	10.5	10.9	20.9
	some value	317	41.4	43.4	64.3
	high value	261	34.1	35.7	100.0
	Total	731	95.6	100.0	
Missing	System Missing	34	4.4		
	Total	34	4.4		
Total		765	100.0		

Recruitment r22, Value that HPSP had on your decision to join the Army

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	167	21.8	36.9	36.9
	little value	13	1.7	2.9	39.8
	neutral	81	10.6	17.9	57.7
	some value	23	3.0	5.1	62.8
	high value	168	22.0	37.2	100.0
	Total	452	59.1	100.0	
Missing	System Missing	313	40.9		
	Total	313	40.9		
Total		765	100.0		

Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	16	2.1	2.3	2.3
	little value	32	4.2	4.7	7.0
	neutral	50	6.5	7.3	14.3
	some value	248	32.4	36.2	50.5
	high value	339	44.3	49.5	100.0
	Total	685	89.5	100.0	
Missing	System Missing	80	10.5		
	Total	80	10.5		
Total		765	100.0		

Recruitment r24, Value that the AEGD-one year had on your decision to join the Army

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	143	18.7	25.1	25.1
	little value	31	4.1	5.4	30.5
	neutral	118	15.4	20.7	51.2
	some value	108	14.1	18.9	70.2
	high value	170	22.2	29.8	100.0
	Total	570	74.5	100.0	
Missing	System Missing	195	25.5		
	Total	195	25.5		
Total		765	100.0		

Recruitment r25, Value that the AEGD-one year has on the Army's efforts to recruit new dental officers

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	21	2.7	3.0	3.0
	little value	45	5.9	6.4	9.4
	neutral	87	11.4	12.4	21.7
	some value	379	49.5	53.8	75.6
	high value	172	22.5	24.4	100.0
	Total	704	92.0	100.0	
Missing	System Missing	61	8.0		
	Total	61	8.0		
Total		765	100.0		

Recruitment r26, Value that the new accession bonus (\$30K) will have on the Army's efforts to recruit new dental officers

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	9	1.2	1.2	1.2
	little value	20	2.6	2.7	4.0
	neutral	37	4.8	5.1	9.0
	some value	295	38.6	40.3	49.3
	high value	371	48.5	50.7	100.0
	Total	732	95.7	100.0	
Missing	System Missing	33	4.3		
	Total	33	4.3		
Total		765	100.0		

Recruitment r27, Value that the new special pay increases will have on the Army's efforts to recruit new dental officers

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no value	20	2.6	2.7	2.7
	little value	66	8.6	9.0	11.7
	neutral	80	10.5	10.9	22.6
	some value	395	51.6	53.8	76.4
	high value	173	22.6	23.6	100.0
	Total	734	95.9	100.0	
Missing	System Missing	31	4.1		
	Total	31	4.1		
Total		765	100.0		

Leadership I28, I feel that senior leadership is aware of the issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	47	6.1	6.2	6.2
	disagree	57	7.5	7.6	13.8
	neutral	80	10.5	10.6	24.4
	agree	377	49.3	50.0	74.4
	strongly agree	193	25.2	25.6	100.0
	Total	754	98.6	100.0	
Missing	System Missing	11	1.4		
	Total	11	1.4		
Total		765	100.0		

Leadership I29, I feel that senior leadership is concerned about the issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	69	9.0	9.3	9.3
	disagree	88	11.5	11.8	21.1
	neutral	115	15.0	15.4	36.5
	agree	321	42.0	43.1	79.6
	strongly agree	152	19.9	20.4	100.0
	Total	745	97.4	100.0	
Missing	System Missing	20	2.6		
	Total	20	2.6		
Total		765	100.0		

Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	72	9.4	9.7	9.7
	disagree	111	14.5	15.0	24.7
	neutral	148	19.3	20.0	44.7
	agree	295	38.6	39.9	84.6
	strongly agree	114	14.9	15.4	100.0
	Total	740	96.7	100.0	
Missing	System Missing	25	3.3		
	Total	25	3.3		
Total		765	100.0		

Leadership I31, I feel that senior leadership is aware of specific pay issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	37	4.8	4.9	4.9
	disagree	47	6.1	6.3	11.2
	neutral	91	11.9	12.1	23.4
	agree	389	50.8	51.9	75.3
	strongly agree	185	24.2	24.7	100.0
	Total	749	97.9	100.0	
Missing	System Missing	16	2.1		
	Total	16	2.1		
Total		765	100.0		

Leadership I32, I feel that senior leadership is concerned about the specific pay issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly disagree	54	7.1	7.3	7.3
	disagree	87	11.4	11.7	19.0
	neutral	134	17.5	18.0	37.0
	agree	325	42.5	43.7	80.6
	strongly agree	144	18.8	19.4	100.0
	Total	744	97.3	100.0	
Missing	System Missing	21	2.7		
	Total	21	2.7		
Total		765	100.0		

Leadership I33, I feel that senior leadership is taking action to address the specific pay issues identified in this survey

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	stringly disagree	64	8.4	8.7	8.7
	disagree	99	12.9	13.4	22.1
	neutral	149	19.5	20.2	42.2
	agree	311	40.7	42.1	84.3
	strongly agree	116	15.2	15.7	100.0
	Total	739	96.6	100.0	
Missing	System Missing	26	3.4		
	Total	26	3.4		
Total		765	100.0		

Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	female	75	9.8	10.0	10.0
	male	674	88.1	90.0	100.0
	Total	749	97.9	100.0	
Missing	System Missing	16	2.1		
	Total	16	2.1		
Total		765	100.0		

Marital Status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	single	77	10.1	10.2	10.2
	married	643	84.1	85.2	95.4
	separated	8	1.0	1.1	96.4
	divorced	26	3.4	3.4	99.9
	widowed	1	.1	.1	100.0
	Total	755	98.7	100.0	
Missing	System Missing	10	1.3		
	Total	10	1.3		
Total		765	100.0		

Age

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	under 25	1	.1	.1	.1
	25-30	67	8.8	8.9	9.0
	31-35	95	12.4	12.6	21.7
	36-40	126	16.5	16.8	38.4
	41-45	244	31.9	32.4	70.9
	46-50	156	20.4	20.7	91.6
	over 50	63	8.2	8.4	100.0
	Total	752	98.3	100.0	
Missing	System Missing	13	1.7		
	Total	13	1.7		
Total		765	100.0		

Area of Concentration

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	63A	227	29.7	30.6	30.6
	63B	228	29.8	30.8	61.4
	63D	39	5.1	5.3	66.7
	63E	29	3.8	3.9	70.6
	63F	78	10.2	10.5	81.1
	63H	4	.5	.5	81.6
	63K	34	4.4	4.6	86.2
	63M	28	3.7	3.8	90.0
	63N	60	7.8	8.1	98.1
	63P	11	1.4	1.5	99.6
	63R	3	.4	.4	100.0
	Total	741	96.9	100.0	
Missing	System Missing	24	3.1		
	Total	24	3.1		
Total		765	100.0		

Type of Unit (present assignment)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	TDA	555	72.5	74.1	74.1
	MTOE	100	13.1	13.4	87.4
	in military school	53	6.9	7.1	94.5
	don't know	5	.7	.7	95.2
	other	36	4.7	4.8	100.0
	Total	749	97.9	100.0	
Missing	System Missing	16	2.1		
	Total	16	2.1		
Total		765	100.0		

Rank

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	CPT	129	16.9	17.2	17.2
	MAJ	152	19.9	20.3	37.5
	LTC	284	37.1	37.9	75.3
	COL	185	24.2	24.7	100.0
	Total	750	98.0	100.0	
Missing	System Missing	15	2.0		
	Total	15	2.0		
Total		765	100.0		

Year graduated from dental school

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	63.00	1	.1	.1	.1
	64.00	1	.1	.1	.3
	65.00	1	.1	.1	.4
	66.00	2	.3	.3	.7
	67.00	4	.5	.5	1.2
	68.00	6	.8	.8	2.0
	69.00	5	.7	.7	2.7
	70.00	8	1.0	1.1	3.7
	71.00	16	2.1	2.1	5.9
	72.00	15	2.0	2.0	7.9
	73.00	17	2.2	2.3	10.2
	74.00	20	2.6	2.7	12.9
	75.00	28	3.7	3.7	16.6
	76.00	32	4.2	4.3	20.9
	77.00	51	6.7	6.8	27.7
	78.00	50	6.5	6.7	34.4
	79.00	69	9.0	9.2	43.6
	80.00	33	4.3	4.4	48.1
	81.00	43	5.6	5.8	53.8
	82.00	33	4.3	4.4	58.2
	83.00	37	4.8	5.0	63.2
	84.00	26	3.4	3.5	66.7
	85.00	33	4.3	4.4	71.1
	86.00	22	2.9	2.9	74.0
	87.00	15	2.0	2.0	76.0
	88.00	18	2.4	2.4	78.4
	89.00	13	1.7	1.7	80.2
	90.00	21	2.7	2.8	83.0
	91.00	16	2.1	2.1	85.1
	92.00	19	2.5	2.5	87.7
	93.00	19	2.5	2.5	90.2
	94.00	22	2.9	2.9	93.2
	95.00	26	3.4	3.5	96.7
	96.00	25	3.3	3.3	100.0
	Total	747	97.6	100.0	
Missing	System Missing	18	2.4		
	Total	18	2.4		
Total		765	100.0		

Year entered AD as a dental officer

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	63.00	1	.1	.1	.1
	65.00	1	.1	.1	.3
	66.00	1	.1	.1	.4
	67.00	2	.3	.3	.7
	68.00	6	.8	.8	1.5
	69.00	2	.3	.3	1.7
	70.00	7	.9	.9	2.7
	71.00	14	1.8	1.9	4.5
	72.00	13	1.7	1.7	6.3
	73.00	15	2.0	2.0	8.3
	74.00	15	2.0	2.0	10.3
	75.00	23	3.0	3.1	13.4
	76.00	27	3.5	3.6	17.0
	77.00	46	6.0	6.1	23.1
	78.00	45	5.9	6.0	29.1
	79.00	69	9.0	9.2	38.4
	80.00	44	5.8	5.9	44.3
	81.00	48	6.3	6.4	50.7
	82.00	37	4.8	4.9	55.6
	83.00	33	4.3	4.4	60.0
	84.00	28	3.7	3.7	63.8
	85.00	34	4.4	4.5	68.3
	86.00	28	3.7	3.7	72.1
	87.00	19	2.5	2.5	74.6
	88.00	13	1.7	1.7	76.3
	89.00	14	1.8	1.9	78.2
	90.00	19	2.5	2.5	80.7
	91.00	21	2.7	2.8	83.6
	92.00	19	2.5	2.5	86.1
	93.00	19	2.5	2.5	88.6
	94.00	23	3.0	3.1	91.7
	95.00	32	4.2	4.3	96.0
	96.00	30	3.9	4.0	100.0
	Total	748	97.8	100.0	
Missing	System Missing	17	2.2		
	Total	17	2.2		
Total		765	100.0		

Years of Active Federal Service

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	.00	9	1.2	1.2	1.2
	1.00	40	5.2	5.3	6.6
	2.00	24	3.1	3.2	9.8
	3.00	19	2.5	2.5	12.3
	4.00	14	1.8	1.9	14.2
	5.00	22	2.9	2.9	17.1
	6.00	21	2.7	2.8	19.9
	7.00	11	1.4	1.5	21.4
	8.00	18	2.4	2.4	23.8
	9.00	18	2.4	2.4	26.2
	10.00	27	3.5	3.6	29.8
	11.00	27	3.5	3.6	33.4
	12.00	25	3.3	3.3	36.8
	13.00	32	4.2	4.3	41.0
	14.00	49	6.4	6.6	47.6
	15.00	47	6.1	6.3	53.9
	16.00	42	5.5	5.6	59.5
	17.00	70	9.2	9.4	68.9
	18.00	49	6.4	6.6	75.4
	19.00	53	6.9	7.1	82.5
	20.00	26	3.4	3.5	86.0
	21.00	34	4.4	4.5	90.5
	22.00	16	2.1	2.1	92.6
	23.00	16	2.1	2.1	94.8
	24.00	16	2.1	2.1	96.9
	25.00	13	1.7	1.7	98.7
	26.00	1	.1	.1	98.8
	27.00	1	.1	.1	98.9
	28.00	5	.7	.7	99.6
	29.00	2	.3	.3	99.9
	31.00	1	.1	.1	100.0
	Total	748	97.8	100.0	
Missing	System Missing	17	2.2		
	Total	17	2.2		
Total		765	100.0		

Number of Overseas Tours

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	.00	73	9.5	9.7	9.7
	1.00	204	26.7	27.2	37.0
	2.00	300	39.2	40.1	77.0
	3.00	135	17.6	18.0	95.1
	4.00	32	4.2	4.3	99.3
	5.00	4	.5	.5	99.9
	6.00	1	.1	.1	100.0
	Total	749	97.9	100.0	
Missing	System Missing	16	2.1		
	Total	16	2.1		
Total		765	100.0		

Demographics d44, Have you ever had a break in service

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	208	27.2	27.3	27.3
	no	554	72.4	72.7	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
	Missing				
	Total	3	.4		
Total		765	100.0		

Demographics d45, Have you ever served in a combat theater

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	121	15.8	15.9	15.9
	no	640	83.7	84.1	100.0
	Total	761	99.5	100.0	
Missing	System	4	.5		
	Missing				
	Total	4	.5		
Total		765	100.0		

Demographics d46, Have you ever participated in any Operation Other Than War (OOTW)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	133	17.4	17.5	17.5
	no	627	82.0	82.5	100.0
	Total	760	99.3	100.0	
Missing	System	5	.7		
	Missing				
	Total	5	.7		
Total		765	100.0		

Demographics d47, Did you have any prior active service before joining the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	171	22.4	22.4	22.4
	no	591	77.3	77.6	100.0
	Total	762	99.6	100.0	
Missing	System	3	.4		
	Missing				
	Total	3	.4		
Total		765	100.0		

Demographics d48, Were you in ROTC, the Reserves, or the National Guard before joining the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	294	38.4	38.5	38.5
	no	470	61.4	61.5	100.0
	Total	764	99.9	100.0	
Missing	System Missing	1	.1		
	Missing				
	Total	1	.1		
Total		765	100.0		

Demographics d49, Were you awarded a Health Professions Scholarship (HPSP)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	195	25.5	25.6	25.6
	no	567	74.1	74.4	100.0
	Total	762	99.6	100.0	
Missing	System Missing	3	.4		
	Missing				
	Total	3	.4		
Total		765	100.0		

Demographics d49a, If "yes", for how many years were you on scholarship

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 year	37	4.8	19.1	19.1
	2 years	57	7.5	29.4	48.5
	3 years	51	6.7	26.3	74.7
	4 years	49	6.4	25.3	100.0
	Total	194	25.4	100.0	
Missing	System Missing	571	74.6		
	Missing				
	Total	571	74.6		
Total		765	100.0		

Demographics d50, Did you incur any student loan debts prior to joining the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	621	81.2	81.6	81.6
	no	140	18.3	18.4	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Missing				
	Total	4	.5		
Total		765	100.0		

Demographics d50a, Estimated Amount of Debt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1000.00	3	.4	.5	.5
	1500.00	1	.1	.2	.7
	1600.00	1	.1	.2	.8
	2000.00	11	1.4	1.8	2.6
	2500.00	2	.3	.3	2.9
	3000.00	12	1.6	2.0	4.9
	3500.00	4	.5	.7	5.5
	4000.00	9	1.2	1.5	7.0
	5000.00	20	2.6	3.3	10.2
	5500.00	1	.1	.2	10.4
	6000.00	11	1.4	1.8	12.2
	6400.00	1	.1	.2	12.4
	7000.00	7	.9	1.1	13.5
	8000.00	16	2.1	2.6	16.1
	8500.00	1	.1	.2	16.3
	9000.00	6	.8	1.0	17.2
	10000.00	36	4.7	5.9	23.1
	11000.00	3	.4	.5	23.6
	12000.00	9	1.2	1.5	25.0
	12500.00	1	.1	.2	25.2
	13000.00	2	.3	.3	25.5
	14000.00	5	.7	.8	26.3
	15000.00	23	3.0	3.7	30.1
	16000.00	10	1.3	1.6	31.7
	17000.00	3	.4	.5	32.2
	18000.00	6	.8	1.0	33.2
	19000.00	3	.4	.5	33.7
	19500.00	1	.1	.2	33.8
	20000.00	65	8.5	10.6	44.4
	21000.00	2	.3	.3	44.7
	22000.00	3	.4	.5	45.2
	23000.00	4	.5	.7	45.9
	24000.00	1	.1	.2	46.0
	25000.00	22	2.9	3.6	49.6
	26000.00	2	.3	.3	49.9
	27000.00	7	.9	1.1	51.1
	28000.00	5	.7	.8	51.9
	30000.00	47	6.1	7.6	59.5
	31000.00	2	.3	.3	59.8
	32000.00	3	.4	.5	60.3
	33000.00	1	.1	.2	60.5
	34000.00	1	.1	.2	60.7
	35000.00	21	2.7	3.4	64.1
	36000.00	3	.4	.5	64.6
	37000.00	2	.3	.3	64.9
	38000.00	2	.3	.3	65.2
	40000.00	29	3.8	4.7	69.9
	42000.00	2	.3	.3	70.2
	43000.00	4	.5	.7	70.9
	44000.00	1	.1	.2	71.1
	45000.00	8	1.0	1.3	72.4
	46000.00	1	.1	.2	72.5
	47000.00	1	.1	.2	72.7
	48000.00	2	.3	.3	73.0
	50000.00	29	3.8	4.7	77.7

Demographics d50a, Estimated Amount of Debt

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	52000.00	4	.5	.7	78.4
	55000.00	7	.9	1.1	79.5
	56000.00	2	.3	.3	79.8
	58000.00	3	.4	.5	80.3
	60000.00	22	2.9	3.6	83.9
	62000.00	2	.3	.3	84.2
	63000.00	1	.1	.2	84.4
	64200.00	1	.1	.2	84.6
	65000.00	7	.9	1.1	85.7
	66000.00	1	.1	.2	85.9
	67000.00	1	.1	.2	86.0
	69000.00	1	.1	.2	86.2
	70000.00	11	1.4	1.8	88.0
	73000.00	1	.1	.2	88.1
	74000.00	1	.1	.2	88.3
	75000.00	3	.4	.5	88.8
	79000.00	1	.1	.2	88.9
	80000.00	14	1.8	2.3	91.2
	81000.00	1	.1	.2	91.4
	84000.00	1	.1	.2	91.5
	85000.00	7	.9	1.1	92.7
	88000.00	1	.1	.2	92.8
	90000.00	7	.9	1.1	94.0
	95000.00	2	.3	.3	94.3
	98000.00	1	.1	.2	94.5
	100000.00	14	1.8	2.3	96.7
	104000.00	1	.1	.2	96.9
	110000.00	3	.4	.5	97.4
	112000.00	1	.1	.2	97.6
	114000.00	1	.1	.2	97.7
	115000.00	1	.1	.2	97.9
	118000.00	1	.1	.2	98.0
	120000.00	2	.3	.3	98.4
	130000.00	1	.1	.2	98.5
	135000.00	1	.1	.2	98.7
	140000.00	2	.3	.3	99.0
	144000.00	1	.1	.2	99.2
	150000.00	3	.4	.5	99.7
	180000.00	1	.1	.2	99.8
	200000.00	1	.1	.2	100.0
	Total	615	80.4	100.0	
Missing	System				
	Missing	150	19.6		
	Total	150	19.6		
Total		765	100.0		

Demographics d51, Did you complete, or are you in, an AEGD-one year program

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	302	39.5	39.7	39.7
	no	459	60.0	60.3	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Total	4	.5		
Total		765	100.0		

Demographics d52, Did the chance to enter the AEGD-one year program influence your decision to join the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	215	28.1	28.8	28.8
	no	532	69.5	71.2	100.0
	Total	747	97.6	100.0	
Missing	System Missing	18	2.4		
	Total	18	2.4		
Total		765	100.0		

Demographics d53, Are you presently fulfilling an initial commitment in the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	99	12.9	13.0	13.0
	no	660	86.3	87.0	100.0
	Total	759	99.2	100.0	
Missing	System Missing	6	.8		
	Total	6	.8		
Total		765	100.0		

Demographics d53, If "yes", do you plan to stay after you initial commitment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	49	6.4	39.5	39.5
	no	75	9.8	60.5	100.0
	Total	124	16.2	100.0	
Missing	System Missing	641	83.8		
	Total	641	83.8		
Total		765	100.0		

Demographics d54, Have you completed specialty training

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	473	61.8	62.2	62.2
	no	288	37.6	37.8	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Total	4	.5		
Total		765	100.0		

Demographics d55, Are you presently in specialty training

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	78	10.2	10.3	10.3
	no	676	88.4	89.7	100.0
	Total	754	98.6	100.0	
Missing	System Missing	11	1.4		
	Total	11	1.4		
Total		765	100.0		

Demographics d56, Did the opportunity to enter specialty training influence your decision to remain on active duty

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	572	74.8	75.9	75.9
	no	182	23.8	24.1	100.0
	Total	754	98.6	100.0	
Missing	System Missing	11	1.4		
	Total	11	1.4		
Total		765	100.0		

Demographics d57, Were you specialty trained prior to joining the ADCS

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	22	2.9	2.9	2.9
	no	740	96.7	97.1	100.0
	Total	762	99.6	100.0	
Missing	System Missing	3	.4		
	Total	3	.4		
Total		765	100.0		

Demographics d58, Did you participate in the Financial Assistance Program (FAP)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	18	2.4	2.4	2.4
	no	743	97.1	97.6	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Missing				
	Total	4	.5		
Total		765	100.0		

Demographics d59, Were you in private practice prior to entering active duty

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	157	20.5	20.6	20.6
	no	604	79.0	79.4	100.0
	Total	761	99.5	100.0	
Missing	System Missing	4	.5		
	Missing				
	Total	4	.5		
Total		765	100.0		

Demographics d60, Have you ever "moonlighted" in private practice while on active duty

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	76	9.9	10.0	10.0
	no	684	89.4	90.0	100.0
	Total	760	99.3	100.0	
Missing	System Missing	5	.7		
	Missing				
	Total	5	.7		
Total		765	100.0		

Demographics d60a, If "yes", was "moonlighting" essential to supplement your income

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	65	8.5	44.2	44.2
	no	82	10.7	55.8	100.0
	Total	147	19.2	100.0	
Missing	System Missing	618	80.8		
	Missing				
	Total	618	80.8		
Total		765	100.0		

Demographics d61, Does your spouse presently work full time

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	224	29.3	34.7	34.7
	no	421	55.0	65.3	100.0
	Total	645	84.3	100.0	
Missing	System Missing	120	15.7		
	Missing				
	Total	120	15.7		
Total		765	100.0		

Demographics d62, Does your spouse presently work part time

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	142	18.6	27.8	27.8
	no	368	48.1	72.2	100.0
	Total	510	66.7	100.0	
Missing	System Missing	255	33.3		
	Missing				
	Total	255	33.3		
Total		765	100.0		

Demographics d63, Is your spouse's employment essential to supplement your income

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	309	40.4	54.5	54.5
	no	258	33.7	45.5	100.0
	Total	567	74.1	100.0	
Missing	System Missing	198	25.9		
	Missing				
	Total	198	25.9		
Total		765	100.0		

Frequencies For Write-in Comments

Appendix B

Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	389	50.8	50.8	50.8
yes	376	49.2	49.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-2, Reasons for joining the ADCS included opportunities to travel

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	424	55.4	55.6	55.6
yes	339	44.3	44.4	100.0
Total	763	99.7	100.0	
Missing System	2	.3		
Missing				
Total	2	.3		
Total	765	100.0		

Comments 64-3, Reasons for joining the ADCS included the quality of practice and professional associations

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	654	85.5	85.5	85.5
yes	111	14.5	14.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	584	76.3	76.3	76.3
yes	181	23.7	23.7	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	528	69.0	69.0	69.0
yes	237	31.0	31.0	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-6, Reasons for joining the ADCS included a sense of duty to serve the country, the Army, or the ADCS

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	666	87.1	87.1	87.1
yes	99	12.9	12.9	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-7, Reasons for joining the ADCS included the opportunity for job security, benefits, and eventually retirement benefits

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	691	90.3	90.3	90.3
yes	74	9.7	9.7	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-8, Reasons for joining the ADCS included a family association with, or acceptance of the military, or prior service

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	702	91.8	91.8	91.8
yes	63	8.2	8.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-10, Reasons for joining the ADCS included financial opportunities, such as to save money, repay debts, or to get a job

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	626	81.8	81.8	81.8
yes	139	18.2	18.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-11, Reasons for joining the ADCS included the high costs of civilian practice start-up costs, high stress of civilian practice, or indecision about practice location

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	694	90.7	90.7	90.7
yes	71	9.3	9.3	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-12, Reasons for joining the ADCS included military draft considerations

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	752	98.3	98.3	98.3
yes	13	1.7	1.7	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-13, Reasons for joining the ADCS included opportunities for a variety of jobs, such as those associated with leadership, education, and administration

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	747	97.6	97.6	97.6
yes	18	2.4	2.4	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 64-9, Reasons for joining the ADCS included the attraction of military life, military training, and good military assignments

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	672	87.8	87.8	87.8
yes	93	12.2	12.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-1, Reasons for remaining in the ADCS included opportunities for residency training and continuing education

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	356	46.5	46.5	46.5
yes	409	53.5	53.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-2, Reasons for remaining in the ADCS included the quality of professional life, mentoring, group practice, quality associations, and job satisfaction

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	531	69.4	69.4	69.4
yes	234	30.6	30.6	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-3, Reasons for remaining in the ADCS included opportunities for travel and the adventure of military life

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	451	59.0	59.0	59.0
yes	314	41.0	41.0	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-4, Reasons for remaining in the ADCS included the opportunity for security, benefits, and eventually retirement benefits

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	517	67.6	67.6	67.6
yes	248	32.4	32.4	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-5, Reasons for remaining in the ADCS included a sense of duty and the opportunity to serve the country, the Army, or the ADCS

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	712	93.1	93.1	93.1
yes	53	6.9	6.9	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-6, Reasons for remaining in the ADCS included good assignment

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	701	91.6	91.8	91.8
yes	63	8.2	8.2	100.0
Total	764	99.9	100.0	
Missing System Missing	1	.1		
Total	1	.1		
Total	765	100.0		

Comments 65-8, Reasons for remaining in the ADCS included the opportunity to gain clinical practice experience

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	713	93.2	93.2	93.2
yes	52	6.8	6.8	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-9, Reasons for remaining in the ADCS included the poor state of the civilian economy

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no	752	98.3	98.3	98.3
	yes	13	1.7	1.7	100.0
	Total	765	100.0	100.0	
Total		765	100.0		

Comments 65-10, Reasons for remaining in the ADCS included the fact that there was no cost for residency training, unlike some civilian programs

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no	762	99.6	99.7	99.7
	yes	2	.3	.3	100.0
	Total	764	99.9	100.0	
Missing	System Missing	1	.1		
	Total	1	.1		
Total		765	100.0		

Comments 65-11, Reasons for remaining in the ADCS included the opportunity for military training, and advancement and promotion opportunities

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no	705	92.2	92.2	92.2
	yes	60	7.8	7.8	100.0
	Total	765	100.0	100.0	
Total		765	100.0		

Comments 65-12, Reasons for remaining in the ADCS included family issues, such as spouse on active duty, spouse working, or children in school

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no	722	94.4	94.4	94.4
	yes	43	5.6	5.6	100.0
	Total	765	100.0	100.0	
Total		765	100.0		

Comments 65-13, Reasons for remaining in the ADCS included indecision about life or practice after the military

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	no	747	97.6	97.8	97.8
	yes	17	2.2	2.2	100.0
	Total	764	99.9	100.0	
Missing	System Missing	1	.1		
	Total	1	.1		
Total		765	100.0		

Comments 65-14, Reasons for remaining in the ADCS included a sense of commitment to soldiers and Army field units

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	761	99.5	99.5	99.5
yes	4	.5	.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-15, Reasons for remaining in the ADCS included a commitment or obligation due to owed service for HPSP, ROTC, AEGD-One Year, or residency training

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	711	92.9	93.1	93.1
yes	53	6.9	6.9	100.0
Total	764	99.9	100.0	
Missing System	1	.1		
Missing				
Total	1	.1		
Total	765	100.0		

Comments 65-16, Reasons for remaining in the ADCS included financial reasons, such as the pay was adequate, the job was adequate, or to save money

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	702	91.8	91.8	91.8
yes	63	8.2	8.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 65-7, Reasons for remaining in the ADCS included the opportunity for a variety of jobs, such as teaching, administrative, leadership, and command

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	713	93.2	93.2	93.2
yes	52	6.8	6.8	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-1, Reasons for leaving the ADCS included age, retirement, or to start next career

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	609	79.6	79.6	79.6
yes	156	20.4	20.4	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-2, Reasons for leaving the ADCS included low pay, poor compensation, or pay inequities

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	385	50.3	50.3	50.3
yes	380	49.7	49.7	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-3, Reasons for leaving the ADCS included too many PCS moves

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	631	82.5	82.5	82.5
yes	134	17.5	17.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-14, Reasons for leaving the ADCS included a poor quality of practice represented by too limited of a scope of practice, poor quality of auxiliaries, poor lab support, limited selection of materials, or restrictions on types of procedures

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	665	86.9	86.9	86.9
yes	100	13.1	13.1	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-5, Reasons for leaving the ADCS included a need for more family or economic stability, such as keeping kids in a school or a spouse's employment

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	641	83.8	83.8	83.8
yes	124	16.2	16.2	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-6, Reasons for leaving the ADCS included continual reduction of resources such as personnel, dollars, and supplies

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	705	92.2	92.3	92.3
yes	59	7.7	7.7	100.0
Total	764	99.9	100.0	
Missing System	1	.1		
Missing				
Total	1	.1		
Total	765	100.0		

Comments 66-7, Reasons for leaving the ADCS included non-selection for residency training

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	722	94.4	94.4	94.4
yes	43	5.6	5.6	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-8, Reasons for leaving the ADCS included deterioration of the ADCS resulting in decreasing esprit de corps and morale, or the lack of a defined purpose

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	688	89.9	90.1	90.1
yes	76	9.9	9.9	100.0
Total	764	99.9	100.0	
Missing System	1	.1		
Missing	1	.1		
Total	765	100.0		

Comments 66-9, Reasons for leaving the ADCS included the downsizing of the Army resulting in reduced benefits, locations, and concern for retirees; or unappreciative Army leadership

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	703	91.9	91.9	91.9
yes	62	8.1	8.1	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-10, Reasons for leaving the ADCS included the feeling of no longer making a contribution or having fun doing the job

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	751	98.2	98.2	98.2
yes	14	1.8	1.8	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-11, Reasons for leaving the ADCS included the presence of unaware or unresponsive senior leadership

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	708	92.5	92.5	92.5
yes	57	7.5	7.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-12, Reasons for leaving the ADCS included the availability of alternative opportunities or jobs

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	718	93.9	93.9	93.9
yes	47	6.1	6.1	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-13, Reasons for leaving the ADCS included non-selection for promotion, poor promotion rates, or unfair promotion criteria

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	715	93.5	93.5	93.5
yes	50	6.5	6.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-4, Reasons for leaving the ADCS included having limited choices of assignments or being poorly treated concerning assignments and jobs

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	693	90.6	90.6	90.6
yes	72	9.4	9.4	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-15, Reasons for leaving the ADCS included the increasing potential for deployments

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	730	95.4	95.4	95.4
yes	35	4.6	4.6	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-16, Reasons for leaving the ADCS included quality of life issues

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	740	96.7	96.7	96.7
yes	25	3.3	3.3	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 66-17, Reasons for leaving the ADCS included the lack of job satisfaction due to career stagnation, emphasis on military duties, administrative requirements, un-rewarded efforts, not practicing specialty, not in control of practice

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	697	91.1	91.1	91.1
yes	68	8.9	8.9	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-1, Additional comments included inadequate pay package, compensation, or incentives

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	549	71.8	71.9	71.9
yes	215	28.1	28.1	100.0
Total	764	99.9	100.0	
Missing System Missing	1	.1		
Total	1	.1		
Total	765	100.0		

Comments 67-2, Additional comments included uncertain future for the ADCS

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	709	92.7	92.7	92.7
yes	56	7.3	7.3	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-3, Additional comments included poor clinic or mid-level leadership

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	732	95.7	95.7	95.7
yes	33	4.3	4.3	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-4, Additional comments included poorly treated concerning assignment or jobs

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	742	97.0	97.0	97.0
yes	23	3.0	3.0	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-5, Additional comments included poor quality of practice represented by a restricted scope of practice, poor quality of auxiliaries, poor lab support, limited selection of materials, or limited procedures

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	723	94.5	94.5	94.5
yes	42	5.5	5.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-6, Additional comments included lack of job satisfaction due to career stagnation, emphasis on military duties, administrative requirements, inability to practice specialty, un-rewarded efforts, lack of control of practice

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	719	94.0	94.0	94.0
yes	46	6.0	6.0	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-7, Additional comments included poor senior leadership evidenced by short sightedness, not being aware of working conditions, lack of devotion to younger officers, or allowing selection of younger officers for residency training

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	726	94.9	94.9	94.9
yes	39	5.1	5.1	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-8, Additional comments included poor promotion rates or promotion criteria

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	743	97.1	97.1	97.1
yes	22	2.9	2.9	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-9, Additional comments included the ADCS was a positive experience

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	723	94.5	94.5	94.5
yes	42	5.5	5.5	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-10, Additional comments included they haven't received specialty training and they want a specialty training opportunity

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	759	99.2	99.2	99.2
yes	6	.8	.8	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Comments 67-11, Additional comments included other various comments, such as, dental officers should be treating patients and there are too many DC officers in non-clinical, admin positions, or residents should still receive DASP while in training

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid no	675	88.2	88.2	88.2
yes	90	11.8	11.8	100.0
Total	765	100.0	100.0	
Total	765	100.0		

Dental Officer Recruitment and Retention Survey

Thank you for participating in this survey. Accuracy and completeness are very important. Circle (or Mark 'X') the appropriate box for each of the questions. In some instances you may be asked to write-in a response.

Career Intentions (CI)	Extremely Likely	Likely	Neutral	Unlikely	Extremely Unlikely	Don't Know N/A
1. I intend to make the Army a career (<i>stay for 20 years or more</i>).	5	4	3	2	1	N/A
2. I intend to leave the Army despite the recent special pay increase.	5	4	3	2	1	N/A
3. I intend to leave after completion of my present tour.	5	4	3	2	1	N/A
4. I intend to leave in less than 3 years.	5	4	3	2	1	N/A
5. I intend to leave in 3 or 4 years	5	4	3	2	1	N/A
6. I intend to leave in 5 or more years	5	4	3	2	1	N/A
7. I intend to leave in less than 3 years unless selected for postgraduate training.	5	4	3	2	1	N/A
8. I intend to leave in 3 or 4 years unless selected for postgraduate training.	5	4	3	2	1	N/A
9. I intend to leave in 5 or more years unless selected for postgraduate training.	5	4	3	2	1	N/A
10. I have completed 20 years and intend to retire despite the recent special pay increase.	5	4	3	2	1	N/A
11. I have completed 20 years and intend to retire in 1 to 2 years.	5	4	3	2	1	N/A
12. I have completed 20 years and intend to retire in 3 to 4 years.	5	4	3	2	1	N/A
13. I have completed 20 years and intend to retire in 5 or more years.	5	4	3	2	1	N/A

Career Influences (CI)	Strong Positive Influence	Positive Influence	No Influence	Negative Influence	Strong Negative Influence	Don't Know N/A
14. Rate the influence the following factors have in your military career planning:						
a. Quality of life	5	4	3	2	1	N/A
b. Family acceptance (<i>spouse and children</i>)	5	4	3	2	1	N/A
c. Pay	5	4	3	2	1	N/A
d. Professional development	5	4	3	2	1	N/A
e. Professional satisfaction (<i>dentistry</i>)	5	4	3	2	1	N/A
f. Postdoctoral training (<i>residency/specialty/administrative training</i>)	5	4	3	2	1	N/A
g. Mentorship (<i>quality of contemporaries and superiors</i>)	5	4	3	2	1	N/A
h. Military duty assignments	5	4	3	2	1	N/A
i. Military training (<i>airborne/air assault/special forces...</i>)	5	4	3	2	1	N/A
j. Sense of duty (<i>civic responsibility/patriotism</i>)	5	4	3	2	1	N/A
k. Esprit de Corps (<i>camaraderie/cohesiveness</i>)	5	4	3	2	1	N/A
l. Possibility of tactical deployment (<i>war, peacekeeping...</i>)	5	4	3	2	1	N/A
m. Travel	5	4	3	2	1	N/A
n. Frequency of moves (<i>PCS</i>)	5	4	3	2	1	N/A
o. Opportunity to "moonlight"	5	4	3	2	1	N/A
p. Employment opportunities for your spouse	5	4	3	2	1	N/A
q. Other (<i>write-in and rate</i>)	5	4	3	2	1	N/A
r. Other (<i>write-in and rate</i>)	5	4	3	2	1	N/A

Career Influences (continued)	Strong Positive Influence	Positive Influence	No Influence	Negative Influence	Strong Negative Influence	Don't Know N/A
For each of the following, rate the INFLUENCE ...						
15. ...the recent special pay increase will have on your military career planning.	5	4	3	2	1	N/A
16. ...that future special pay increases will have on your military career planning.	5	4	3	2	1	N/A
17. ...the following additional increases in pay might have on your career planning:						
a. an increase of \$1000 to \$4000 per year (before taxes)	5	4	3	2	1	N/A
b. an increase of \$4000+ to \$8000 per year (before taxes)	5	4	3	2	1	N/A
c. an increase of \$8000+ to \$12,000 per year (before taxes)	5	4	3	2	1	N/A
d. an increase in excess of \$12,000 per year (before taxes)	5	4	3	2	1	N/A
18. ...the following method of payment for special pays has on your career planning:						
a. "lump sum" bonus (annual payment)	5	4	3	2	1	N/A
b. monthly installments	5	4	3	2	1	N/A
c. a combination of bonus and monthly installments	5	4	3	2	1	N/A
19. ... that the opportunity for postgraduate education has (had) on your military career planning.	5	4	3	2	1	N/A

Recruitment (R)	High Value	Some Value	Neutral	Little Value	No Value	Don't Know N/A
For each of the following, rate the VALUE ...						
20. ...that the opportunity for postgraduate education had on your decision to join the Army.	5	4	3	2	1	N/A
21. ...that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers.	5	4	3	2	1	N/A
22. ...that the HPSP had on your decision to join the Army.	5	4	3	2	1	N/A
23. ...that the HPSP has on the Army's efforts to recruit new dental officers.	5	4	3	2	1	N/A
24. ...that the AEGD-One Year had on your decision to join the Army.	5	4	3	2	1	N/A
25. ...that the AEGD-One Year has on the Army's efforts to recruit new dental officers.	5	4	3	2	1	N/A
26. ...that the new accession bonus (\$30K) will have on the Army's efforts to recruit new dental officers.	5	4	3	2	1	N/A
27. ...that the new special pay increases (VSP, DASP, BCP) will have on the Army's efforts to recruit new dental officers.	5	4	3	2	1	N/A

Leadership (L)	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know N/A
Respond to the following statements beginning with, I FEEL ...						
28. ...that senior leadership (OTSG, DENCOM, DSSAs) is aware of the issues identified in this survey.	5	4	3	2	1	N/A
29. ...that senior leadership is concerned about the issues identified in this survey.	5	4	3	2	1	N/A
30. ...that senior leadership is taking action to address the issues identified in this survey.	5	4	3	2	1	N/A
31. ...that senior leadership is aware of the specific pay issues identified in this survey.	5	4	3	2	1	N/A
32. ...that senior leadership is concerned about the specific pay issues identified in this survey.	5	4	3	2	1	N/A
33. ...that senior leadership is taking action to address the specific pay issues identified in this survey.	5	4	3	2	1	N/A

The following demographic section is important for valid statistical analysis of the data. We know that different groups within a sample may respond differently to a survey. Measuring and interpreting these differences impacts on future policy in the ADCS. All responses are anonymous and confidential.

Demographics (D)

34. Gender	35. Martial Status	36. Age	37. AOC	38. Type of Unit Presently Assigned To	39. Rank
1 Female	1 Single	1 under 25	1 63A	1 a TDA unit	1 CPT
2 Male	2 Married	2 25-30	2 63B	2 a MTOE unit	2 MAJ
	3 Separated	3 31-35	3 63D	3 in military schooling	3 LTC
	4 Divorced	4 36-40	4 63E	4 don't know	4 COL
	5 Widowed	5 41-45	5 63F	5 other	5 BG
		6 46-50	6 63H		6 MG
		7 over 50	7 63K		
			8 63M		
			9 63N		
			10 63P		
			11 63R		

40. Year graduated from dental school (write-in)	41. Year entered on Active Duty as a dental officer (write-in)	42. Years of Active Federal Service (write-in)	43. Number of Overseas Tours (write-in)

44. Have you ever had a break in service (i.e., left active duty and came back)?	1 Yes	2 No		
45. Have you ever served in a combat theater (e.g. Desert Storm)?	1 Yes	2 No		
46. Have you ever participated in any Operations Other Than War (e.g., Joint Endeavor, Somalia, etc...)?	1 Yes	2 No		
47. Did you have any prior active service before joining the ADCS?	1 Yes	2 No		
48. Were you in ROTC, the Reserves, or the National Guard before joining the ADCS?	1 Yes	2 No		
49. Were you awarded a Health Professions Scholarship (HPSP)?	1 Yes	2 No		
a. If "Yes", for how many years were you on scholarship? (mark one)	4 years	3 years	2 years	1 year
50. Did you incur any student loan debts (undergraduate and dental school) prior to joining the ADCS?	1 Yes	2 No		
a. If "Yes", what do you estimate was the amount of your debt when you entered active duty? (write-in, round to the nearest thousand)	\$			
51. Did you complete, or are you in, a AEGD-One Year program?	1 Yes	2 No		
52. Did the chance to enter the AEGD-One Year program influence your decision to join the ADCS?	1 Yes	2 No		
53. Are you presently fulfilling an initial commitment in the ADCS?	1 Yes	2 No		
a. If "Yes", do you plan to stay after your initial commitment?	1 Yes	2 No		

Demographics (continued)			
54. Have you completed specialty training (<i>residency in a dental specialty</i>)?	1 Yes	2 No	
55. Are you presently in specialty training (<i>residency in a dental specialty</i>)?	1 Yes	2 No	
56. Did the opportunity to enter specialty training influence your decision to remain on active duty?	1 Yes	2 No	
57. Were you specialty trained prior to joining the ADCS?	1 Yes	2 No	
58. Did you participate in the Financial Assistance Program (<i>FAP</i>)?	1 Yes	2 No	
59. Were you in private practice prior to entering active duty?	1 Yes	2 No	
60. Have you ever, (do you now), "moonlight" in private practice while on active duty?	1 Yes	2 No	
a. If "Yes", was "moon-lighting" essential to supplement your income?	1 Yes	2 No	
61. Does your spouse presently work full time? (if "Yes", see #63)	1 Yes	2 No	N/A
62. Does your spouse presently work part time? (if "Yes", see #63)	1 Yes	2 No	N/A
63. Is your spouse's employment essential to supplement your income?	1 Yes	2 No	N/A

The following section is reserved for your comments. There are three specific areas that we ask you address. Simple bullet comments will suffice, however, the choice is yours.

Comments(C)

64. List your three reasons for joining the ADCS:

- 1)
- 2)
- 3)

65. List your three reasons for remaining in the ADCS:

- 1)
- 2)
- 3)

66. List your three reasons for leaving the ADCS:

- 1)
- 2)
- 3)

67. Additional Comments:

Thank you for taking the time to fill out this survey. Please enclose in the attached envelope and return to you local command or you may forward the survey directly to this office. (Don't forget to place a stamp on the envelope!) If you have suggestions on how we might improve this instrument, please add them to the comment section.

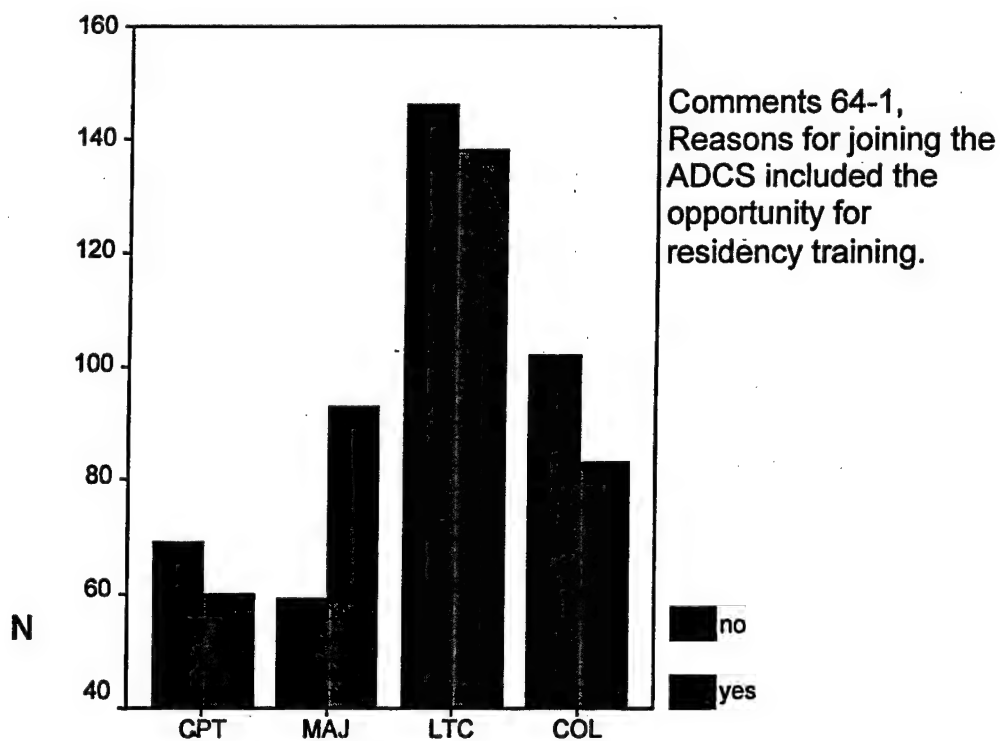
Glossary of Special Terms and Abbreviations

ADCS	Army Dental Care System	HPSP	Health Professions Scholarship Program, awarded upon entering dental school or while in dental school in exchange for an obligated tour of duty
AEGD-One Year	Advanced Education in General Dentistry, 1 year program	MTOE	Modified Table of Organization & Equipment, refers to deployable units (e.g. 464th Med Co (DS))
AOC	Area of Concentration, special skill identifier or "MOS" such as 63A, 63B, etc...	OTSC	Office of The Surgeon General, located in Falls Church, VA
BCP	Board Certification Pay	TDA	Table of Distribution & Allowances, refers to fixed facilities and units that typically don't deploy (e.g. any DENTAC)
DASP	Dental Additional Special Pay, "continuation pay" annual hump payment	VSP	Variable Special Pay, "pre-pay", monthly payments
DENCOM	Dental Command, based at Fort Sam Houston, TX		
DSSA	Dental Service Support Area, regional commands		
FAP	Financial Assistance Program, usually awarded to individuals in civilian post graduate training programs in exchange for an obligated tour of duty		

Crosstabulations: Recruiting Variables significantly related to Rank, AOC, Age, Type of Unit, and Gender

**Demographics 39, Rank * Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training
Crosstabulation**

Count		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics 39, Rank	CPT	69	60	129
	MAJ	59	93	152
	LTC	146	138	284
	COL	102	83	185
Total		376	374	750

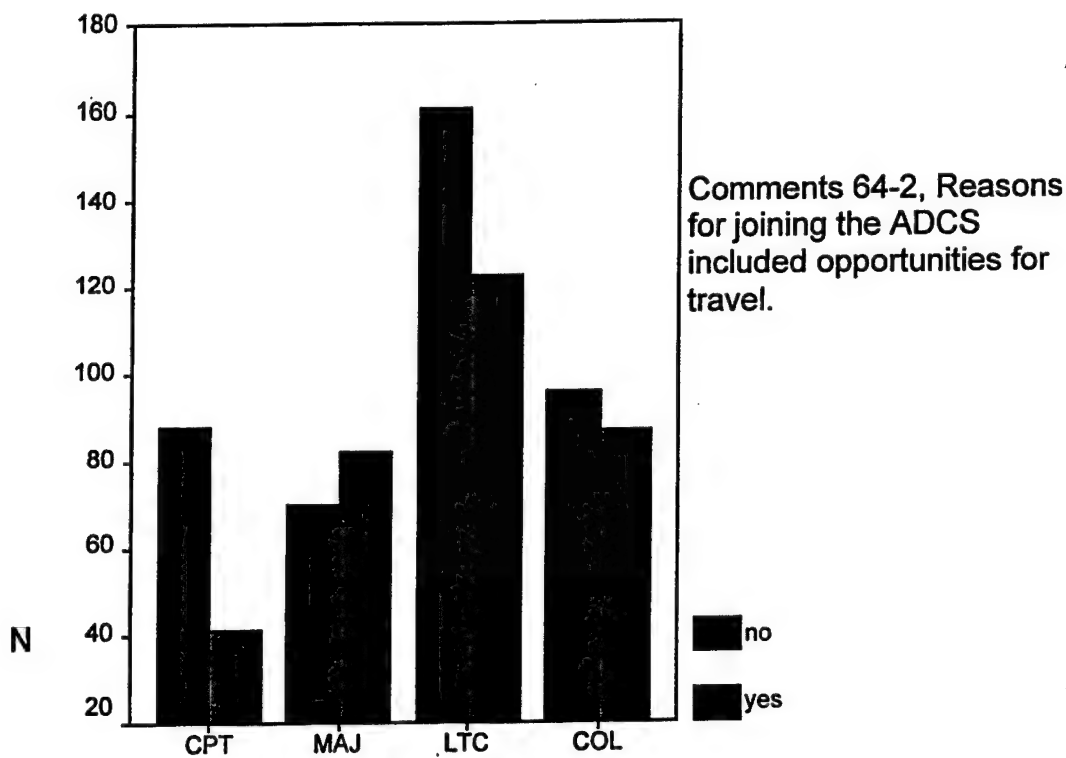


Demographics 39, Rank

Demographics 39, Rank * Comments 64-2, Reasons for joining the ADCS included opportunities to travel Crosstabulation

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics 39, Rank	CPT	88	41	129
	MAJ	70	82	152
	LTC	161	123	284
	COL	96	87	183
Total		415	333	748

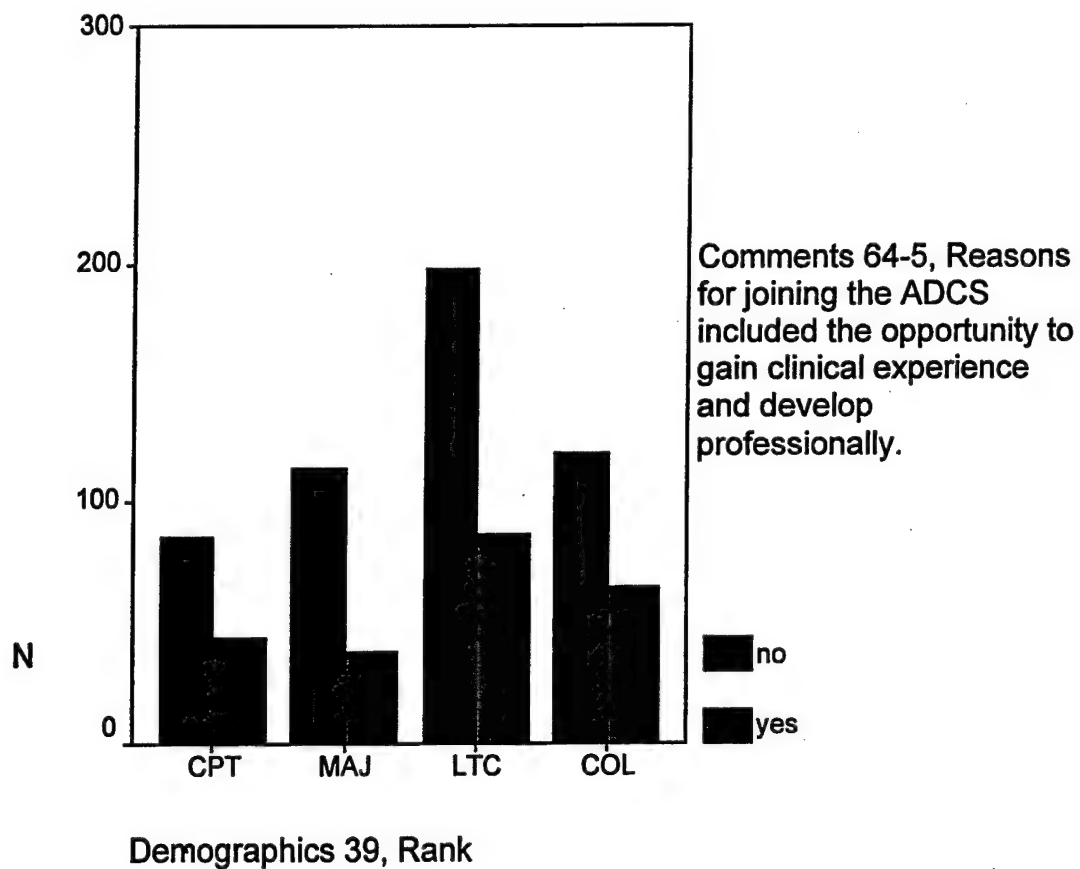


Demographics 39, Rank

**Demographics 39, Rank * Comments 64-5, Reasons for joining
he ADCS included the opportunity to gain clinical experience and
develop professionally Crosstabulation**

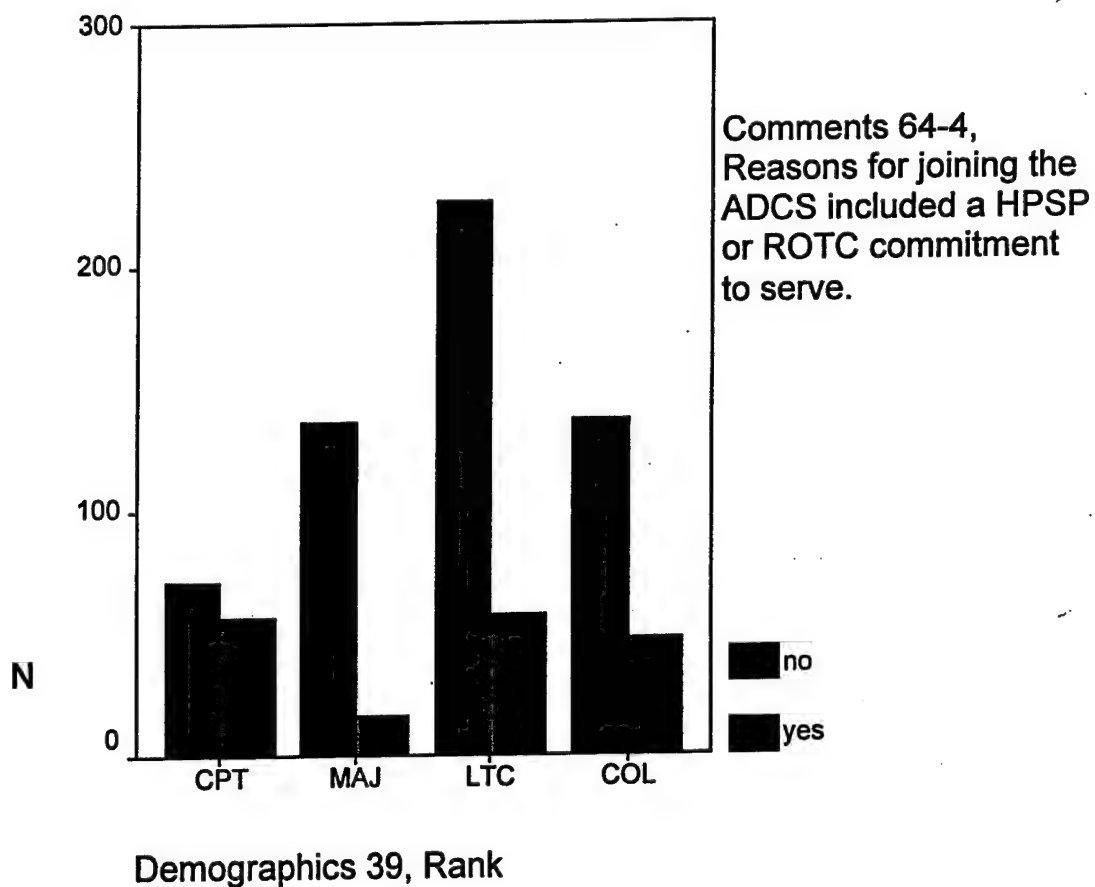
Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics 39, Rank	CPT	85	44	129
	MAJ	114	38	152
	LTC	198	86	284
	COL	120	65	185
Total		517	233	750



Demographics 39, Rank * Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve
Crosstabulation

Count		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics 39, Rank	CPT	72	57	129
	MAJ	136	16	152
	LTC	226	58	284
	COL	137	48	185
Total		571	179	750



**Demographics 39, Rank * Comments 64-3, Reasons for joining
the ADCS included the quality of practice and professional
associations Crosstabulation**

Count

		Comments 64-3, Reasons for joining the ADCS included the quality of practice and professional associations		Total
		no	yes	
Demographics	CPT	121	8	129
39, Rank	MAJ	134	18	152
	LTC	242	42	284
	COL	143	42	185
Total		640	110	750

**Demographics 39, Rank * Comments 64-4, Reasons for joining
the ADCS included having a HPSP or ROTC commitment to serve
Crosstabulation**

Count

		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics	CPT	72	57	129
39, Rank	MAJ	136	16	152
	LTC	226	58	284
	COL	137	48	185
Total		571	179	750

**Demographics 39, Rank * Comments 64-5, Reasons for joining
he ADCS included the opportunity to gain clinical experience and
develop professionally Crosstabulation**

Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics	CPT	85	44	129
39, Rank	MAJ	114	38	152
	LTC	198	86	284
	COL	120	65	185
Total		517	233	750

**Demographics 39, Rank * Comments 64-11, Reasons for joining
the ADCS included the high costs of civilian practice start-up
costs, high stress of civilian practice, or indecision about
practice location Crosstabulation**

Count

		Comments 64-11, Reasons for joining the ADCS included the high costs of civilian practice start-up costs, high stress of civilian practice, or indecision about practice location		Total
		no	yes	
Demographics	CPT	123	6	129
39, Rank	MAJ	145	7	152
	LTC	249	35	284
	COL	164	21	185
Total		681	69	750

Demographics 39, Rank * Comments 64-12, Reasons for joining the ADCS included military draft considerations Crosstabulation

Count

		Comments 64-12, Reasons for joining the ADCS included military draft considerations		Total
		no	yes	
Demographics 39, Rank	CPT	129		129
	MAJ	152		152
	LTC	282	2	284
	COL	174	11	185
Total		737	13	750

Demographics 39, Rank * Recruitment r21, Value that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r21, Value that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 39, Rank	CPT	3	15	13	47	47	125
	MAJ	2	15	17	68	41	143
	LTC	3	21	35	114	100	273
	COL	1	7	15	82	71	176
Total		9	58	80	311	259	717

Demographics 39, Rank * Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 39, Rank	CPT	5	2	6	41	63	117
	MAJ	4	13	18	54	34	123
	LTC	5	12	20	96	126	259
	COL	1	3	6	50	113	173
Total		15	30	50	241	336	672

Demographics 39, Rank * Recruitment r24, Value that the AEGD-One Year Program had on your decision to join the Army Crosstabulation

Count

		Recruitment r24, Value that the AEGD-One Year Program had on your decision to join the Army					Total
		no value	little value	neutral	some value	high value	
Demographics 39, Rank	CPT	18	9	22	23	43	115
	MAJ	30	4	11	26	40	111
	LTC	60	9	43	29	63	204
	COL	29	8	39	29	23	128
Total		137	30	115	107	169	558

Demographics 39, Rank * Recruitment r25, Value that the AEGD-One Year Program has on the Army's efforts to recruit new dental officers Crosstabulation

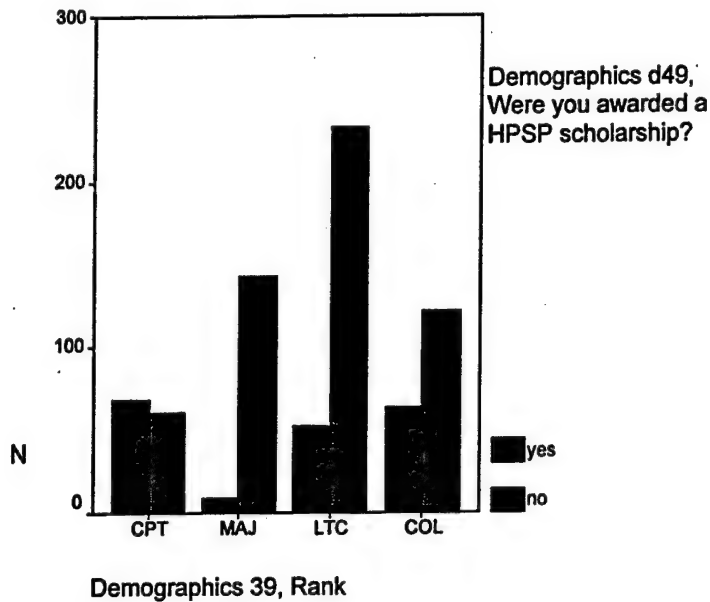
Count

		Recruitment r25, Value that the AEGD-One Year Program has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 39, Rank	CPT	7	8	17	53	39	124
	MAJ	6	7	22	71	23	129
	LTC	5	21	25	154	58	263
	COL	2	6	21	94	52	175
Total		20	42	85	372	172	691

Demographics 39, Rank * Demographics d49, Were you awarded a HPSP? Crosstabulation

Count

		Demographics d49, Were you awarded a HPSP?		Total
		yes	no	
Demographics 39, Rank	CPT	68	60	128
	MAJ	9	143	152
	LTC	52	232	284
	COL	63	121	184
Total		192	556	748



Demographics 39, Rank * Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship? Crosstabulation

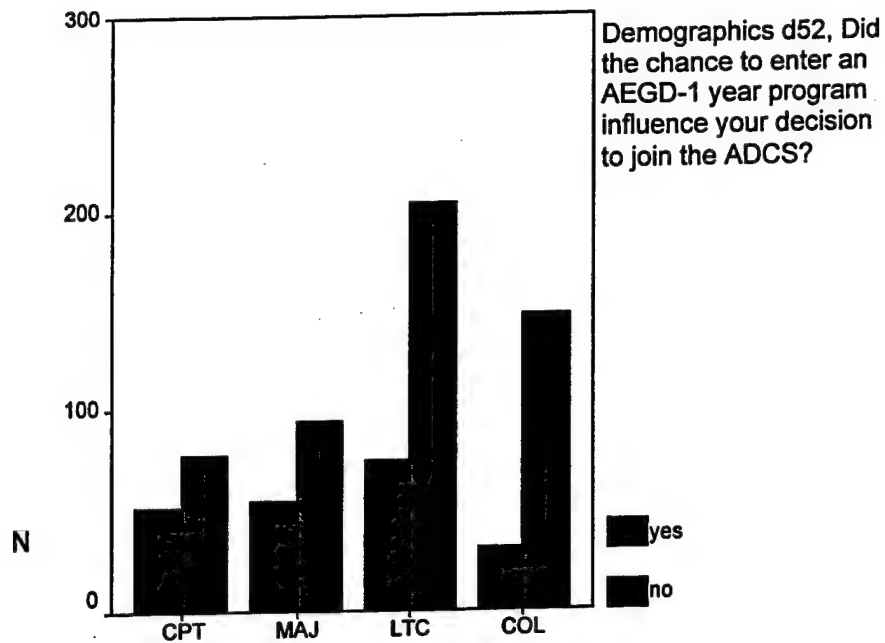
Count

		Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship?				Total
		1 year	2 years	3 years	4 years	
Demographics 39, Rank	CPT	21	37	8	1	67
	MAJ	3	2	1	3	9
	LTC	2	7	18	25	52
	COL	10	11	23	19	63
Total		36	57	50	48	191

Demographics 39, Rank * Demographics d52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS? Crosstabulation

Count

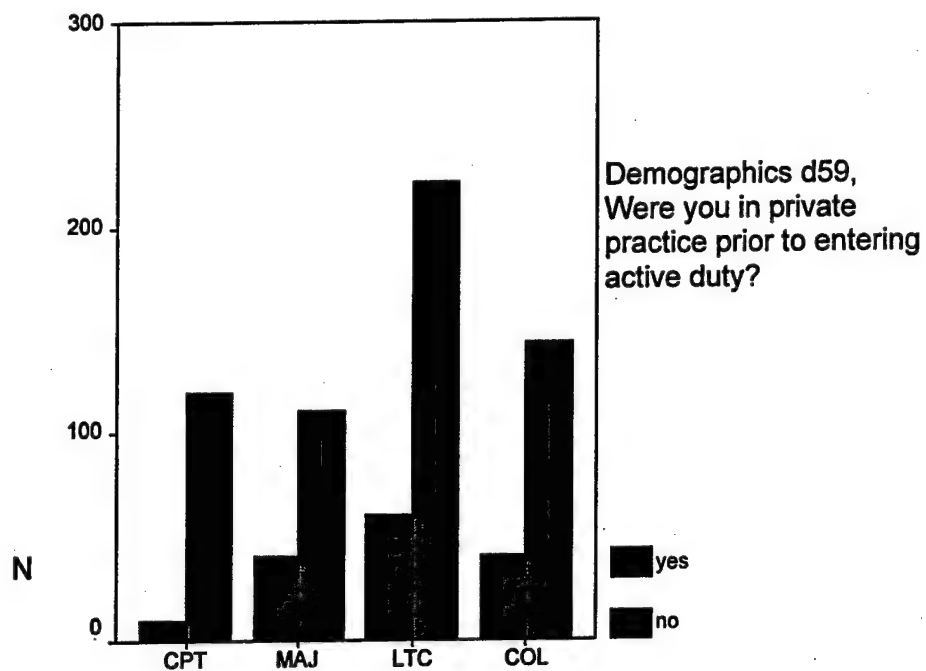
		Demographics d52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS?		Total
		yes	no	
Demographics 39, Rank	CPT	52	77	129
	MAJ	55	94	149
	LTC	75	204	279
	COL	31	147	178
Total		213	522	735



Demographics 39, Rank

Demographics 39, Rank * Demographics d59, Were you in private practice prior to entering active duty? Crosstabulation

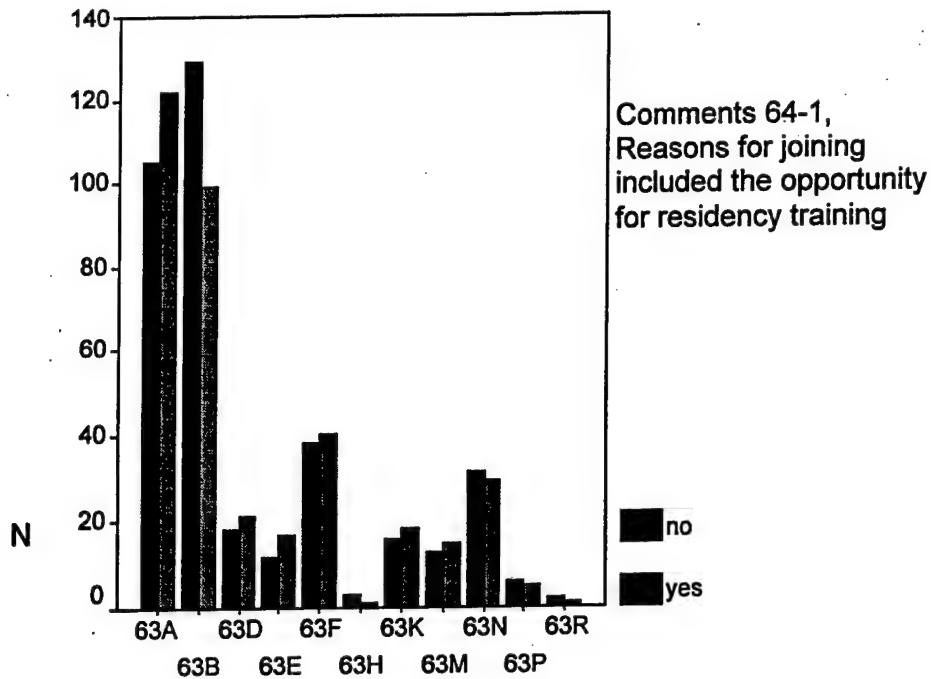
Count		Demographics d59, Were you in private practice prior to entering active duty?		Total
		yes	no	
Demographics 39, Rank	CPT	10	119	129
	MAJ	41	110	151
	LTC	61	222	283
	COL	41	143	184
Total		153	594	747



Demographics 39, Rank

Demographics 37, Area of Concentration * Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training
Crosstabulation

Count		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics 37, Area of Concentration	63A	105	122	227
	63B	129	99	228
	63D	18	21	39
	63E	12	17	29
	63F	38	40	78
	63H	3	1	4
	63K	16	18	34
	63M	13	15	28
	63N	31	29	60
	63P	6	5	11
	63R	2	1	3
Total		373	368	741



Demographics 37, Area of Concentration

Demographics 37, Area of Concentration * Comments 64-2, Reasons for joining the ADCS included opportunities to travel Crosstabulation

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics 37, Area of Concentration	63A	131	96	227
	63B	115	112	227
	63D	23	16	39
	63E	13	16	29
	63F	51	27	78
	63H	2	2	4
	63K	18	16	34
	63M	18	10	28
	63N	34	26	60
	63P	6	4	10
	63R	1	2	3
Total		412	327	739

Demographics 37, Area of Concentration * Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally Crosstabulation

Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics 37, Area of Concentration	63A	163	64	227
	63B	144	84	228
	63D	25	14	39
	63E	21	8	29
	63F	55	23	78
	63H	4		4
	63K	22	12	34
	63M	20	8	28
	63N	46	14	60
	63P	7	4	11
	63R	2	1	3
Total		509	232	741

Demographics 37, Area of Concentration * Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve Crosstabulation

Count

		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics 37, Area of Concentration	63A	162	65	227
	63B	185	43	228
	63D	35	4	39
	63E	19	10	29
	63F	65	13	78
	63H	2	2	4
	63K	29	5	34
	63M	18	10	28
	63N	40	20	60
	63P	8	3	11
	63R	1	2	3
Total		564	177	741

Demographics 37, Area of Concentration * Comments 64-7, Reasons for joining the ADCS included the opportunity for job security, benefits, and eventually retirement benefits Crosstabulation

Count

		Comments 64-7, Reasons for joining the ADCS included the opportunity for job security, benefits, and eventually retirement benefits		Total
		no	yes	
Demographics 37, Area of Concentration	63A	209	18	227
	63B	195	33	228
	63D	33	6	39
	63E	26	3	29
	63F	73	5	78
	63H	3	1	4
	63K	30	4	34
	63M	27	1	28
	63N	59	1	60
	63P	10	1	11
	63R	3		3
	Total	668	73	741

Demographics 37, Area of Concentration * Recruitment r26, Value that the new accession bonus of \$30K will have on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r26, Value that the new accession bonus of \$30K will have on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 37, Area of Concentration	63A	2	2	16	67	130	217
	63B	1	7	9	96	106	219
	63D	1	2	1	13	22	39
	63E		1		15	12	28
	63F	2	1	3	36	32	74
	63H				1	2	3
	63K		1	1	12	17	31
	63M			4	9	15	28
	63N	2	3	3	27	21	56
	63P				7	4	11
	63R				1	2	3
Total		8	17	37	284	363	709

Demographics 37, Area of Concentration * Recruitment r27, Value that the new special pay increases (VSP, DASP, BCP) will have on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r27, Value that the new special pay increases (VSP, DASP, BCP) will have on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 37, Area of Concentration	63A	5	15	25	115	56	216
	63B	2	22	16	126	53	219
	63D	1	5	4	17	12	39
	63E	1	1	4	14	8	28
	63F	3	4	9	43	15	74
	63H			1	1	1	3
	63K	1	3	4	15	8	31
	63M	1	2	9	10	6	28
	63N	4	10	5	33	6	58
	63P			1	7	3	11
	63R				2	1	3
Total		18	62	78	383	169	710

Demographics 37, Area of Concentration * Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship? Crosstabulation

Count

		Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship?				Total
		1 year	2 years	3 years	4 years	
Demographics 37, Area of Concentration	63A	22	35	8	5	70
	63B	8	6	17	17	48
	63D		1	3	2	6
	63E	2	1	2	5	10
	63F		1	9	2	12
	63H			2	1	3
	63K		3	1	5	9
	63M		2	4	2	8
	63N	1	5	2	8	16
	63P	2	1	1	1	5
	63R	1				1
Total		36	55	49	48	188

Demographics 37, Area of Concentration * Demographics d57, Were you specialty trained prior to joining the ADCS? Crosstabulation

Count

		Demographics d57, Were you specialty trained prior to joining the ADCS?		Total
		yes	no	
Demographics 37, Area of Concentration	63A		226	226
	63B	2	225	227
	63D	1	38	39
	63E	1	28	29
	63F	3	75	78
	63H		4	4
	63K	3	31	34
	63M	2	26	28
	63N	8	51	59
	63P		11	11
	63R		3	3
Total		20	718	738

**Demographics 36, Age * Comments 64-1, Reasons for joining the
ADCS Included the opportunity for residency training
Crosstabulation**

Count

		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics	under 25		1	1
36, Age	25-30	36	31	67
	31-35	48	47	95
	36-40	52	74	126
	41-45	119	125	244
	46-50	91	65	156
	over 50	32	31	63
Total		378	374	752

**Demographics 36, Age * Comments 64-2, Reasons for joining the
ADCS Included opportunities to travel Crosstabulation**

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics	under 25		1	1
36, Age	25-30	50	17	67
	31-35	53	42	95
	36-40	58	68	126
	41-45	139	105	244
	46-50	86	68	154
	over 50	30	33	63
Total		416	334	750

Demographics 36, Age * Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally Crosstabulation

Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics	under 25	1		1
36, Age	25-30	45	22	67
	31-35	70	25	95
	36-40	80	46	126
	41-45	161	83	244
	46-50	112	44	156
	over 50	49	14	63
Total		518	234	752

Demographics 36, Age * Comments 64-12, Reasons for joining the ADCS included military draft considerations Crosstabulation

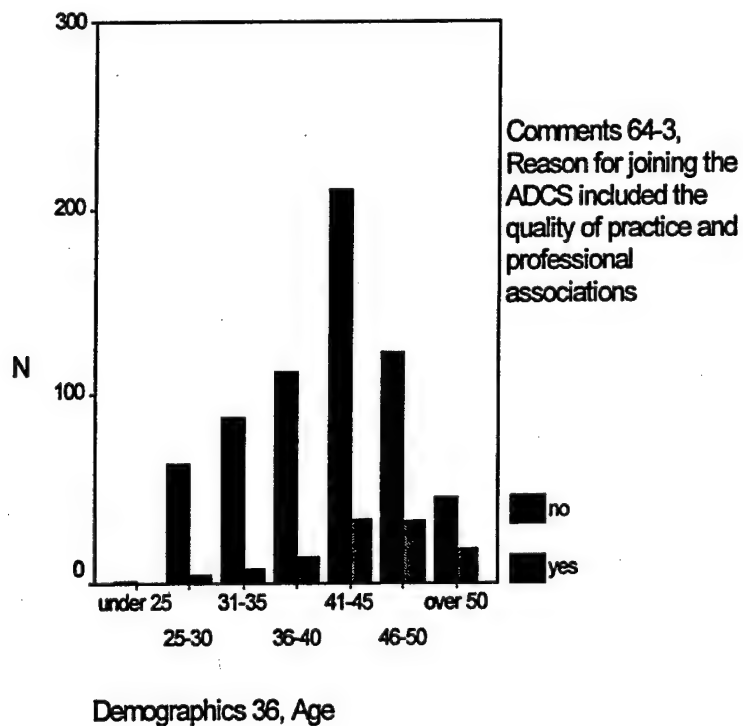
Count

		Comments 64-12, Reasons for joining the ADCS included military draft considerations		Total
		no	yes	
Demographics	under 25	1		1
36, Age	25-30	67		67
	31-35	95		95
	36-40	126		126
	41-45	242	2	244
	46-50	150	6	156
	over 50	58	5	63
Total		739	13	752

**Demographics 36, Age * Comments 64-3, Reasons for joining the
ADCS included the quality of practice and professional
associations Crosstabulation**

Count

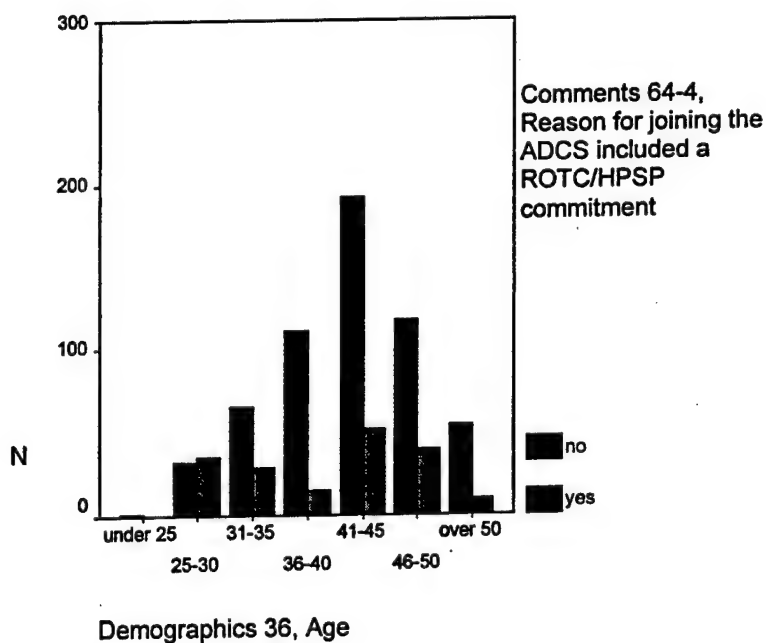
		Comments 64-3, Reasons for joining the ADCS included the quality of practice and professional associations		Total
		no	yes	
Demographics	under 25	1		1
36, Age	25-30	63	4	67
	31-35	88	7	95
	36-40	112	14	126
	41-45	210	34	244
	46-50	123	33	156
	over 50	45	18	63
Total		642	110	752



Demographics 36, Age * Comments 64-4, Reasons for joining the ADCS Included having a HPSP or ROTC commitment to serve
Crosstabulation

Count

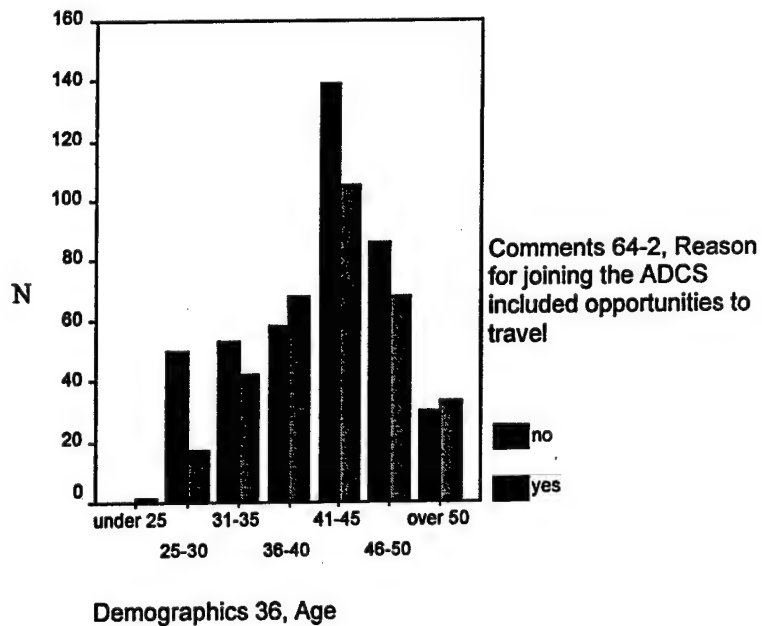
		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics 36, Age	under 25	1		1
	25-30	32	35	67
	31-35	66	29	95
	36-40	111	15	126
	41-45	192	52	244
	46-50	117	39	156
	over 50	54	9	63
Total		573	179	752



Demographics 36, Age * Comments 64-2, Reasons for joining the ADCS included opportunities to travel Crosstabulation

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics 36, Age	under 25		1	1
	25-30	50	17	67
	31-35	53	42	95
	36-40	58	68	126
	41-45	139	105	244
	46-50	86	68	154
	over 50	30	33	63
Total		416	334	750



Demographics 36, Age * Recruitment r21, Value that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r21, Value that the opportunity for postgraduate education has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics 36, Age	under 25				1		1
	25-30	3	9	6	19	27	64
	31-35	2	12	12	38	29	93
	36-40		11	13	64	33	121
	41-45	2	17	26	101	84	230
	46-50	2	7	14	66	59	148
	over 50		2	8	24	27	61
Total		9	58	79	313	259	718

Demographics 36, Age * Recruitment r22, Value that the HPSP had on your decision to join the Army Crosstabulation

Count

		Recruitment r22, Value that the HPSP had on your decision to join the Army					Total
		no value	little value	neutral	some value	high value	
Demographics 36, Age	under 25					1	1
	25-30	9	2	3	4	37	55
	31-35	19		14	3	21	57
	36-40	27	2	10	1	7	47
	41-45	69	4	18	7	49	147
	46-50	27	3	22	6	42	100
	over 50	12	1	13	1	10	37
Total		163	12	80	22	167	444

Demographics 36, Age * Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics	under 25					1	1
36, Age	25-30	5		1	17	37	60
	31-35	3	5	9	35	32	84
	36-40	1	8	13	44	42	108
	41-45	5	10	15	84	109	223
	46-50	1	4	9	44	84	142
	over 50		2	3	20	32	57
Total		15	29	50	244	337	675

Demographics 36, Age * Recruitment r24, Value that the AEGD-One Year Program had on your decision to join the Army Crosstabulation

Count

		Recruitment r24, Value that the AEGD-One Year Program had on your decision to join the Army					Total
		no value	little value	neutral	some value	high value	
Demographics	under 25					1	1
36, Age	25-30	6	8	9	13	28	64
	31-35	19	3	13	16	25	76
	36-40	13	3	14	24	42	96
	41-45	60	8	36	25	51	180
	46-50	31	7	30	21	16	105
	over 50	9	1	14	8	6	38
Total		138	30	116	107	169	560

Demographics 36, Age * Demographics d47, Did you have any prior active service before joining the ADCS? Crosstabulation

Count

		Demographics d47, Did you have any prior active service before joining the ADCS?		Total
		yes	no	
Demographics 36, Age	under 25		1	1
	25-30	8	59	67
	31-35	13	81	94
	36-40	16	109	125
	41-45	57	187	244
	46-50	43	113	156
	over 50	32	31	63
Total		169	581	750

Demographics 36, Age * Demographics d49, Were you awarded a HPSP? Crosstabulation

Count

		Demographics d49, Were you awarded a HPSP?		Total
		yes	no	
Demographics 36, Age	under 25	1		1
	25-30	43	24	67
	31-35	24	70	94
	36-40	6	120	126
	41-45	57	187	244
	46-50	53	103	156
	over 50	8	54	62
Total		192	558	750

Demographics 36, Age * Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship? Crosstabulation

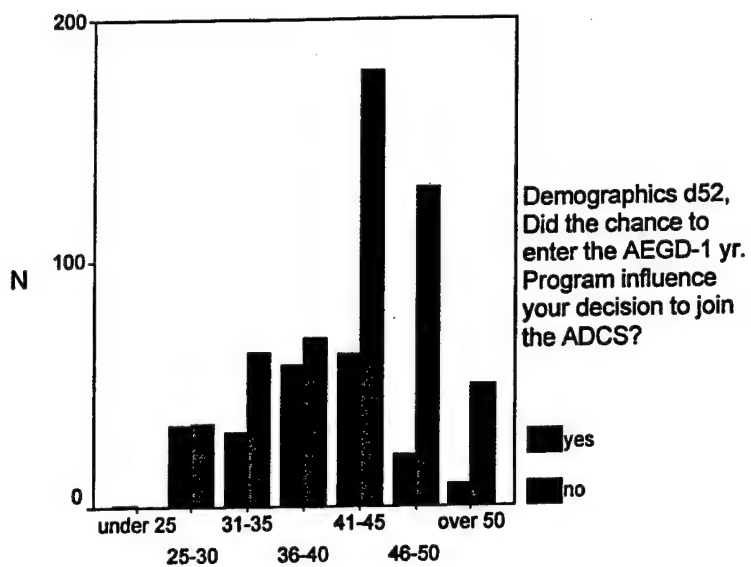
Count

		Demographics d49a, If "yes" to awarded a HPSP, for how many years were you on scholarship?				Total
		1 year	2 years	3 years	4 years	
Demographics 36, Age	under 25	1				1
	25-30	13	25	4		42
	31-35	8	11	4	1	24
	36-40	1	2		3	6
	41-45		8	24	25	57
	46-50	13	10	15	14	52
	over 50		1	3	5	9
Total		36	57	50	48	191

Demographics 36, Age * Demographics d52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS? Crosstabulation

Count

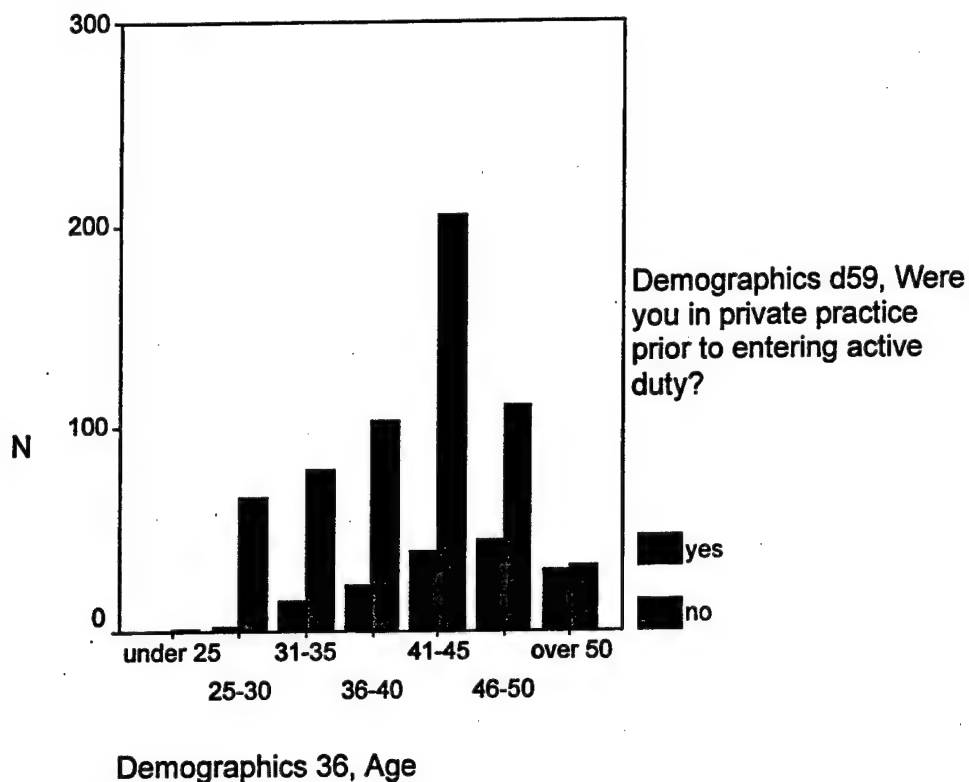
		Demographics d52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS?		Total
		yes	no	
Demographics 36, Age	under 25	1		1
	25-30	33	34	67
	31-35	30	63	93
	36-40	58	68	126
	41-45	62	179	241
	46-50	21	130	151
	over 50	9	49	58
Total		214	523	737



Demographics 36, Age

Demographics 36, Age * Demographics d59, Were you in private practice prior to entering active duty? Crosstabulation

Count		Demographics d59, Were you in private practice prior to entering active duty?		Total
		yes	no	
Demographics 36, Age	under 25		1	1
	25-30	2	65	67
	31-35	15	79	94
	36-40	22	104	126
	41-45	39	205	244
	46-50	44	111	155
	over 50	30	32	62
Total		152	597	749



Demographics 38, Type of Unit (present assignment) * Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training Crosstabulation

Count		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	287	268	555
	MTOE	53	47	100
	in military school	22	31	53
	don't know	1	4	5
	other	14	22	36
Total		377	372	749

**Demographics 38, Type of Unit (present assignment) * Comments 64-2,
Reasons for joining the ADCS included opportunities to travel
Crosstabulation**

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	317	236	553
	MTOE	50	50	100
	in military school	24	29	53
	don't know	4	1	5
	other	20	16	36
Total		415	332	747

**Demographics 38, Type of Unit (present assignment) * Comments 64-5,
Reasons for joining the ADCS included the opportunity to gain clinical
experience and develop professionally Crosstabulation**

Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	392	163	555
	MTOE	67	33	100
	in military school	35	18	53
	don't know	1	4	5
	other	23	13	36
Total		518	231	749

**Demographics 38, Type of Unit (present assignment) * Comments 64-4,
Reasons for joining the ADCS included having a HPSP or ROTC
commitment to serve Crosstabulation**

Count

		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	418	137	555
	MTOE	76	24	100
	in military school	43	10	53
	don't know	5		5
	other	28	8	36
Total		570	179	749

**Demographics 38, Type of Unit (present assignment) * Comments 64-3,
Reasons for joining the ADCS included the quality of practice and
professional associations Crosstabulation**

Count

		Comments 64-3, Reasons for joining the ADCS included the quality of practice and professional associations		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	467	88	555
	MTOE	91	9	100
	in military school	45	8	53
	don't know	5		5
	other	31	5	36
Total		639	110	749

Demographics 38, Type of Unit (present assignment) * Comments 64-10, Reasons for joining the ADCS included financial opportunities, such as to save money, repay debts, or to get a job Crosstabulation

Count

		Comments 64-10, Reasons for joining the ADCS included financial opportunities, such as to save money, repay debts, or to get a job		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	447	108	555
	MTOE	81	19	100
	in military school	47	6	53
	don't know	5		5
	other	33	3	36
Total		613	136	749

Demographics 38, Type of Unit (present assignment) * Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training Crosstabulation

Count

		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics 38, Type of Unit (present assignment)	TDA	287	268	555
	MTOE	53	47	100
	in military school	22	31	53
	don't know	1	4	5
	other	14	22	36
Total		377	372	749

Demographics 38, Type of Unit (present assignment) * Demographics d49, Were you awarded a HPSP? Crosstabulation

Count

		Demographics d49, Were you awarded a HPSP?		Total
		yes	no	
Demographics 38, Type of Unit (present assignment)	TDA	134	419	553
	MTOE	23	77	100
	in military school	19	34	53
	don't know		5	5
	other	15	21	36
Total		191	556	747

Demographics 38, Type of Unit (present assignment) * Demographics 52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS? Crosstabulation

Count

		Demographics d52, Did the chance to enter the AEGD-One Year Program influence your decision to join the ADCS?		Total
		yes	no	
Demographics 38, Type of Unit (present assignment)	TDA	138	404	542
	MTOE	37	63	100
	in military school	20	31	51
	don't know	3	2	5
	other	12	24	36
Total		210	524	734

**Demographics 38, Type of Unit (present assignment) * Demographics
d57, Were you specialty trained prior to joining the ADCS?
Crosstabulation**

Count

		Demographics d57, Were you specialty trained prior to joining the ADCS?		Total
		yes	no	
Demographics 38, Type of Unit (present assignment)	TDA	20	533	553
	MTOE		100	100
	in military school		53	53
	don't know		5	5
	other		36	36
Total		20	727	747

**Demographics 34, Gender * Comments 64-1, Reasons for joining
the ADCS included the opportunity for residency training
Crosstabulation**

Count

		Comments 64-1, Reasons for joining the ADCS included the opportunity for residency training		Total
		no	yes	
Demographics 34, Gender	female	38	37	75
	male	340	334	674
Total		378	371	749

**Demographics 34, Gender * Comments 64-2, Reasons for joining
the ADCS included opportunities to travel Crosstabulation**

Count

		Comments 64-2, Reasons for joining the ADCS included opportunities to travel		Total
		no	yes	
Demographics 34, Gender	female	49	26	75
	male	365	307	672
Total		414	333	747

**Demographics 34, Gender * Comments 64-5, Reasons for joining
the ADCS included the opportunity to gain clinical experience and
develop professionally Crosstabulation**

Count

		Comments 64-5, Reasons for joining the ADCS included the opportunity to gain clinical experience and develop professionally		Total
		no	yes	
Demographics	female	50	25	75
34, Gender	male	467	207	674
Total		517	232	749

**Demographics 34, Gender * Comments 64-4, Reasons for joining
the ADCS included having a HPSP or ROTC commitment to serve
Crosstabulation**

Count

		Comments 64-4, Reasons for joining the ADCS included having a HPSP or ROTC commitment to serve		Total
		no	yes	
Demographics	female	57	18	75
34, Gender	male	512	162	674
Total		569	180	749

**Demographics 34, Gender * Comments 64-8, Reasons for joining
the ADCS included a family association with, or acceptance of
the military, or prior service Crosstabulation**

Count

		Comments 64-8, Reasons for joining the ADCS included a family association with, or acceptance of the military, or prior service		Total
		no	yes	
Demographics	female	62	13	75
34, Gender	male	626	48	674
Total		688	61	749

Demographics 34, Gender * Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r23, Value that the HPSP has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics	female	5	3	6	23	30	67
34, Gender	male	10	27	44	220	305	606
Total		15	30	50	243	335	673

Demographics 34, Gender * Recruitment r25, Value that the AEGD-One Year Program has on the Army's efforts to recruit new dental officers Crosstabulation

Count

		Recruitment r25, Value that the AEGD-One Year Program has on the Army's efforts to recruit new dental officers					Total
		no value	little value	neutral	some value	high value	
Demographics	female	7	5	9	29	18	68
34, Gender	male	12	39	76	343	152	622
Total		19	44	85	372	170	690

Crosstabulations: Leadership variables significantly related to Rank, AOC, Age, Type of Unit, and Gender

Demographics 39, Rank * Leadership I28, I feel that senior leadership is aware of the issues identified in this survey Crosstabulation

Count

		Leadership I28, I feel that senior leadership is aware of the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	6	6	18	72	25	127
	MAJ	14	23	17	70	26	150
	LTC	16	20	26	155	62	279
	COL	8	7	16	74	78	183
Total		44	56	77	371	191	739

Demographics 39, Rank * Leadership I29, I feel that senior leadership is concerned about the issues identified in this survey Crosstabulation

Count

		Leadership I29, I feel that senior leadership is concerned about the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	9	14	21	64	18	126
	MAJ	22	27	29	55	13	146
	LTC	27	35	48	122	45	277
	COL	7	11	13	76	74	181
Total		65	87	111	317	150	730

Demographics 39, Rank * Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey Crosstabulation

Count

		Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	7	14	24	67	14	126
	MAJ	25	30	37	45	10	147
	LTC	29	47	56	105	34	271
	COL	8	17	27	75	55	182
Total		69	108	144	292	113	726

Demographics 39, Rank * Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	2	7	18	67	32	126
	MAJ	16	20	18	74	21	149
	LTC	13	16	36	154	59	278
	COL	3	4	17	88	70	182
Total		34	47	89	383	182	735

Demographics 39, Rank * Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	2	14	27	63	20	126
	MAJ	22	24	30	63	9	148
	LTC	25	33	52	120	44	274
	COL	2	12	22	77	68	181
Total		51	83	131	323	141	729

Demographics 39, Rank * Leadership I33, I feel that senior leadership is taking action to address the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I33, I feel that senior leadership is taking action to address the specific pay issues identified in this survey					Total
		stringly disagree	disagree	neutral	agree	strongly agree	
Demographics 39, Rank	CPT	3	14	24	68	16	125
	MAJ	26	28	36	50	7	147
	LTC	25	41	59	112	35	272
	COL	6	14	26	79	56	181
Total		60	97	145	309	114	725

Demographics 39, Rank * Career Influences 14g, Mentorship Crosstabulation

Count

		Career Influences 14g, Mentorship					Total
		strong negative influence	negative influence	no influence	positive influence	strong positive influence	
Demographics 39, Rank	CPT	2	5	12	65	43	127
	MAJ	11	10	28	69	32	150
	LTC	8	15	30	146	75	274
	COL		5	17	84	76	182
Total		21	35	87	364	226	733

Demographics 37, Area of Concentration * Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey Crosstabulation

Count

		Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 37, Area of Concentration	63A	25	29	50	93	23	220
	63B	13	34	29	92	53	221
	63D	7	5	5	17	5	39
	63E	2	4	6	8	8	28
	63F	4	14	20	29	9	76
	63H				3	1	4
	63K	3	2	7	17	4	33
	63M	3	2	8	11	3	27
	63N	14	14	14	13	2	57
	63P		1	3	4	3	11
	63R				1	2	3
Total		71	105	142	288	113	719

Demographics 37, Area of Concentration * Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 37, Area of Concentration	63A	19	25	43	105	29	221
	63B	8	25	32	96	62	223
	63D	3	4	4	19	8	38
	63E	3		8	9	8	28
	63F	3	11	15	34	13	76
	63H				3	1	4
	63K	2	3	4	18	6	33
	63M	3	2	5	12	4	26
	63N	12	11	14	15	7	59
	63P			3	6	2	11
	63R				1	2	3
Total		53	81	128	318	142	722

Demographics 37, Area of Concentration * Career Influences 14g, Mentorship Crosstabulation

Count

		Career Influences 14g, Mentorship					Total
		strong negative influence	negative influence	no influence	positive influence	strong positive influence	
Demographics 37, Area of Concentration	63A	13	13	30	111	56	223
	63B	5	11	21	111	76	224
	63D		2	6	15	14	37
	63E	1		3	13	11	28
	63F	1	6	11	38	19	75
	63H			1	2		3
	63K	1		5	17	11	34
	63M			3	17	7	27
	63N		3	8	27	22	60
	63P				7	4	11
	63R				1	2	3
Total		21	35	88	359	222	725

Demographics 36, Age * Leadership I28, I feel that senior leadership is aware of the issues identified in this survey Crosstabulation

Count

		Leadership I28, I feel that senior leadership is aware of the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	3	4	8	38	13	66
	31-35	6	12	12	47	17	94
	36-40	10	11	15	67	22	125
	41-45	15	21	27	124	55	242
	46-50	8	8	9	69	58	152
	over 50	2	1	6	26	26	61
Total		44	57	77	371	192	741

Demographics 36, Age * Leadership I29, I feel that senior leadership is concerned about the issues identified in this survey Crosstabulation

Count

		Leadership I29, I feel that senior leadership is concerned about the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	3	11	7	34	10	65
	31-35	14	13	19	38	8	92
	36-40	14	17	26	55	10	122
	41-45	23	27	38	102	49	239
	46-50	11	13	15	61	51	151
	over 50	1	7	4	28	22	62
Total		66	88	109	318	151	732

Demographics 36, Age * Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey Crosstabulation

Count

		Leadership I30, I feel that senior leadership is taking action to address the issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	3	6	13	35	9	66
	31-35	10	18	22	37	5	92
	36-40	16	26	33	38	8	121
	41-45	27	36	47	96	32	238
	46-50	12	13	24	60	40	149
	over 50	1	10	7	25	18	61
Total		69	109	146	291	113	728

Demographics 36, Age * Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	1	3	8	36	17	65
	31-35	4	10	13	50	16	93
	36-40	12	12	13	65	21	123
	41-45	10	15	38	128	50	241
	46-50	7	5	11	76	52	151
	over 50	1	2	6	28	25	62
Total		35	47	89	383	182	736

Demographics 36, Age * Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I32, I feel senior leadership is concerned about the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	1	5	15	33	11	65
	31-35	7	18	17	42	8	92
	36-40	16	19	26	53	8	122
	41-45	17	25	49	103	44	238
	46-50	9	11	20	63	48	151
	over 50	1	7	4	29	21	62
Total		51	85	131	323	141	731

Demographics 36, Age * Leadership I33, I feel that senior leadership is taking action to address the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I33, I feel that senior leadership is taking action to address the specific pay issues identified in this survey					Total
		stringly disagree	disagree	neutral	agree	strongly agree	
Demographics 36, Age	under 25					1	1
	25-30	2	3	14	36	11	66
	31-35	9	16	22	39	5	91
	36-40	15	25	32	41	5	118
	41-45	23	35	46	99	34	237
	46-50	11	10	24	66	41	152
	over 50	1	8	9	27	17	62
Total		61	97	147	308	114	727

Demographics 38, Type of Unit (present assignment) * Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey Crosstabulation

Count

		Leadership I31, I feel that senior leadership is aware of the specific pay issues identified in this survey					Total
		strongly disagree	disagree	neutral	agree	strongly agree	
Demographics 38, Type of Unit (present assignment)	TDA	23	29	67	284	142	545
	MTOE	5	5	10	50	27	97
	in military school	3	7	7	27	9	53
	don't know			2	1		3
	other	3	5	2	20	5	35
Total		34	46	88	382	183	733